

IN THE UNITED STATES COURT  
NORTHERN DISTRICT OF OHIO  
EASTERN DIVISION

IN RE: NATIONAL PRESCRIPTION MDL NO. 2804  
OPIATE LITIGATION

Case No. 17-mdl-2804

Judge Dan Aaron Polster

This document relates to:

City of Cleveland, Ohio v. Purdue Pharma L.P.,  
et al.,  
Case No. 1:18-OP-45132

Videotaped deposition of  
MICHAEL CONNELLY  
November 7, 2018  
9:05 a.m.

Taken at:  
Zashin & Rich  
950 Main Avenue  
Cleveland, Ohio  
Wendy L. Klauss, RPR

<p>Page 2</p> <p>1 APPEARANCES:</p> <p>2</p> <p>3 On behalf of the City of Cleveland and</p> <p>4 the Witness and the Plaintiffs' Executive</p> <p>5 Committee (MDL)Plaintiff:</p> <p>6 Zarzur Mujumdar &amp; Debrosse</p> <p>7 DIANDRA DEBROSSE ZIMMERMANN, ESQ</p> <p>8 2332 2nd Avenue North</p> <p>9 Birmingham, AL 35203</p> <p>10 (205) 983-7985</p> <p>11 Fuli@zarzur.com</p> <p>12 -AND-</p> <p>13 The City of Cleveland</p> <p>14 ELENA BOOP, ESQ</p> <p>15 601 Lakeside Avenue, Room 106</p> <p>16 Cleveland, OH 44114</p> <p>17 (216) 664-3727</p> <p>18 Eboop@city.cleveland.oh.us</p> <p>19 -AND-</p> <p>20 Zashin &amp; Rich</p> <p>21 AMI J PATEL, ESQ</p> <p>22 950 Main Avenue, 4th Floor</p> <p>23 Cleveland, OH 44113</p> <p>24 (216) 696-4441</p> <p>25 Ajp@zrlaw.com</p> <p>On behalf of Distributor Defendant</p> <p>McKesson Corporation, Co-Liaison Counsel</p> <p>for the Distributor Defendants:</p> <p>Covington &amp; Burling LLP</p> <p>SONYA D WINNER, ESQ</p> <p>One Front Street</p> <p>San Francisco, CA 94111-5356</p> <p>(415) 591-6000</p> <p>Swinner@cov.com</p> <p>-AND-</p> <p>ANNA Q HAN, ESQ</p> <p>One City Center</p> <p>850 Tenth Street, NW</p> <p>Washington, DC 20001-4956</p> <p>(202) 662-6000</p> <p>Ahan@cov.com</p>	<p>Page 4</p> <p>1 APPEARANCES, Continued:</p> <p>2 On behalf of Johnson &amp; Johnson and</p> <p>3 Janssen Pharmaceuticals, Inc :</p> <p>4 Tucker Ellis, LLP</p> <p>5 JENNIFER L STEINMETZ, ESQ</p> <p>6 950 Main Avenue, Suite 1100</p> <p>7 Cleveland, OH 44113</p> <p>8 (216) 592-5000</p> <p>9 Jennifer.steinmetz@tuckerellis.com</p> <p>10</p> <p>11 On behalf of Teva Pharmaceutical</p> <p>12 Industries Ltd :</p> <p>13 Morgan Lewis, LLP</p> <p>14 THEODORE DAYNO, ESQ,</p> <p>15 600 Anton Boulevard, Suite 1800</p> <p>16 Costa Mesa, CA 92626-7653</p> <p>17 (714) 830-0600</p> <p>18 Theodore.dayno@morganlewis.com</p> <p>19 On behalf of Distributor</p> <p>20 AmerisourceBergen Drug Corporation,</p> <p>21 Co-Liaison Counsel for the Distributor</p> <p>22 Defendants:</p> <p>23 Jackson Kelly PLLC</p> <p>24 GRETCHEN M CALLAS, ESQ</p> <p>25 500 Lee Street East, Suite 1600</p> <p>Charleston, WV 25301-3202</p> <p>(304) 340-1169</p> <p>Gcallas@jacksonkelly.com</p> <p>On behalf of Defendant Mallinckrodt LLC:</p> <p>Ropes &amp; Gray</p> <p>HAYDEN MILLER, ESQ</p> <p>1211 Avenue of the Americas</p> <p>New York, NY 10036</p> <p>(212) 596-9451</p> <p>Hayden.miller@ropesgray.com</p> <p>~~~~~</p> <p>ALSO PRESENT:</p> <p>Kurt Henschel, Videographer</p> <p>~~~~~</p>
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<p style="text-align: right;">Page 14</p> <p>1 for examination, as provided by the Statute,  2 being by me first duly sworn, as hereinafter  3 certified, deposed and said as follows:  4 EXAMINATION OF MICHAEL CONNELLY  5 BY MS. WINNER:  6 Q. Good morning.  7 A. Good morning.  8 Q. Could you please state your full  9 name for the record.  10 A. Michael Connelly, C-O-N-N-E-L-L-Y.  11 Q. And what is your address?  12 A. My work address or my --  13 Q. Well, why don't you give me your  14 work address, to start with.  15 A. It's 1300 Ontario Street,  16 Cleveland, Ohio, 44113.  17 Q. Can you just tell me the city where  18 you live?  19 A. I live in Brunswick, Ohio.  20 Q. And where are you currently  21 employed?  22 A. City of Cleveland, Division of  23 Police.  24 Q. And what is your title?  25 A. Police lieutenant.</p>	<p style="text-align: right;">Page 16</p> <p>1 and subsequent use of a firearm.  2 Q. And when was that?  3 A. Approximately 2015. I don't  4 remember the exact date.  5 Q. You understand that you are under  6 oath today?  7 A. I do.  8 Q. The same as if you were testifying  9 in court?  10 A. Yes.  11 Q. Is there any medical or other  12 reason that you can't understand my questions  13 or give full and complete answers today?  14 A. No.  15 Q. I'm not going to go through the  16 long drill about depositions, because you have  17 been here before. The one thing I will say to  18 you is if you do not understand one of my  19 questions, please speak up, let me know, and I  20 will attempt to clarify it, because if we don't  21 speak up, I'll assume that you understand it or  22 at least think you understand it.  23 A. Okay.  24 Q. What did you do, if anything, to  25 prepare for your deposition here today?</p>
<p style="text-align: right;">Page 15</p> <p>1 Q. Is the address that you just gave  2 me a division of police address?  3 A. That's the --  4 MS. ZIMMERMANN: Object to form.  5 You may answer.  6 A. The division of police  7 headquarters.  8 Q. Now, you testified before, I  9 assume?  10 A. I have.  11 Q. And have you had your deposition  12 taken before?  13 A. I have.  14 Q. How many times?  15 A. One time.  16 Q. And what kind of case was that?  17 A. It was -- I was a witness in a use  18 of force by a suburban police department.  19 Q. Which police department?  20 A. Strongsville.  21 Q. And were you a party in that case?  22 A. No.  23 Q. And just generally, what was the  24 subject matter of your testimony?  25 A. My observations during an arrest</p>	<p style="text-align: right;">Page 17</p> <p>1 MS. ZIMMERMANN: I'm just going to  2 state an objection on the record to the extent  3 it involves any communications protected by  4 attorney-client privilege. You may answer,  5 Lieutenant.  6 A. I met with counsel three or four  7 times. I think the longest meeting we had was  8 maybe three or four hours, and the shortest  9 meeting was maybe 40 minutes.  10 Q. And when were those meetings?  11 A. Over the last week, and I had one  12 meeting several months ago, and I don't  13 remember the exact date of that meeting, but it  14 was probably for a couple hours, and it was  15 with defense as well -- or with the city's  16 counsel as well.  17 Q. And was anyone other than counsel  18 present at any of these meetings?  19 A. No.  20 Q. Any other employees of the city,  21 other than lawyers, present at any of those  22 meetings?  23 A. No.  24 Q. Is there anyone else you have  25 spoken to about this deposition?</p>

5 (Pages 14 - 17)

<p style="text-align: right;">Page 18</p> <p>1 A. Just my supervisor, Commander Gary 2 Gingell. 3 Q. And what have you discussed with 4 Commander Gingell about this deposition? 5 A. Just notifying him that I was going 6 to be here today, and that I was going to be 7 meeting with counsel on the subsequent days 8 before today. 9 Q. Did you review any documents in 10 preparing for this deposition? 11 A. I looked over a couple of my 12 emails, some photos, not very many. 13 Q. Anything else that you looked at? 14 A. Not that I can remember, off the 15 top of my head. 16 Q. Did any of the documents that you 17 looked at help you remember things that you 18 haven't recalled? 19 A. Some of the documents, they asked 20 me -- I was asked about the specific -- 21 MS. ZIMMERMANN: Lieutenant, to the 22 extent any communications that you had with 23 your counsel, you're not to testify about those 24 communications, okay? 25 THE WITNESS: Okay.</p>	<p style="text-align: right;">Page 20</p> <p>1 "opioids" to mean? 2 A. Meaning a drug that's derived from, 3 like, a poppy that is used to -- used in pain, 4 like a pain medication, or, in my case, we see 5 a lot of heroin and fentanyl on the streets, so 6 we would use opioids in that context as well. 7 Q. And you don't recall whether any of 8 the criminal matters in which you have 9 testified involved any of the kinds of opioids 10 you just described? 11 MS. ZIMMERMANN: Objection. Asked 12 and answered. You may answer, Lieutenant. 13 THE WITNESS: I can answer? 14 Q. Yes. 15 MS. ZIMMERMANN: Yes, sir. 16 A. I'm sure I've testified in a heroin 17 case regarding opioids. 18 Q. Have you ever testified previously 19 in any noncriminal matters, other than the 20 use-of-force case we talked about previously? 21 A. Can you clarify that, like for the 22 city or -- 23 Q. Like a civil case. 24 A. Just personal matters. 25 Q. And what kinds of person matters?</p>
<p style="text-align: right;">Page 19</p> <p>1 Q. Yes. I'm not asking you what you 2 said -- 3 A. So they did refresh my memory after 4 I was able to see them, yes. 5 Q. And on what subjects was your 6 memory refreshed? 7 A. Just that had I seen this document 8 before and, after seeing the document, I 9 recalled that I had seen it before, and there 10 were other documents that I had not seen 11 before. 12 Q. Now, in addition to the deposition 13 you gave previously in the use-of-force case, 14 what other kinds of matters have you testified 15 in previously? 16 A. Just criminal trial matters, 17 arrests, and that would be about it. 18 Q. How many of those, approximately, 19 do you think you have testified in? 20 A. 50, 50, and this is just a ballpark 21 figure. 22 Q. Did any of those cases involve 23 opioids? 24 A. I can't recall. 25 Q. What do you understand the term</p>	<p style="text-align: right;">Page 21</p> <p>1 A. A custody case. 2 Q. Anything else? 3 A. That's it. 4 Q. Have you ever testified in any 5 administrative or disciplinary hearings? 6 A. No. 7 Q. Have you ever provided testimony 8 before any government executives or policy 9 makers or legislators? 10 A. No. 11 Q. Where are you from originally? 12 A. Cleveland, Ohio. 13 Q. So you have lived here your whole 14 life? 15 A. I lived in Nevada for a short 16 period of time. 17 Q. And when did you live in Nevada? 18 A. 1983, 1984, returned to Ohio in 19 1985. 20 Q. Where did you go to high school? 21 A. Padua Franciscan High School. 22 Q. And where is that? 23 A. Parma, Ohio. Parma, Ohio. 24 Q. You may need to speak up so that 25 the court reporter and the people on the phone</p>



<p style="text-align: right;">Page 22</p> <p>1 can hear you.</p> <p>2 A. Okay.</p> <p>3 Q. And after you graduated from high</p> <p>4 school, what did you do next?</p> <p>5 A. Shortly after I graduated from high</p> <p>6 school, I moved to Nevada, where I took several</p> <p>7 jobs. Eventually I joined the Nevada National</p> <p>8 Guard, worked out there for a couple of years,</p> <p>9 and then moved back to Cleveland, Ohio.</p> <p>10 I was in the Ohio National Guard</p> <p>11 here in Cleveland, graduated from -- I went to</p> <p>12 officers candidate school, graduated from</p> <p>13 officers candidate school, was hired by</p> <p>14 Cleveland police in 1990.</p> <p>15 Q. And you have been with the</p> <p>16 Cleveland police ever since then?</p> <p>17 A. That's correct.</p> <p>18 Q. So when you first started working</p> <p>19 for Cleveland police, what was your first job</p> <p>20 with the police?</p> <p>21 A. I was a patrolman in the fourth</p> <p>22 district.</p> <p>23 Q. How long?</p> <p>24 A. Eight years.</p> <p>25 Q. And as a patrolman in the eighth</p>	<p style="text-align: right;">Page 24</p> <p>1 well.</p> <p>2 Q. And when you were detailed to the</p> <p>3 narcotics unit, what did you do?</p> <p>4 A. I was assigned to the street squad,</p> <p>5 and I basically, I did a lot of observing. I</p> <p>6 didn't do a lot of hands-on work, but the</p> <p>7 detectives and the sergeants would kind of</p> <p>8 train you about how narcotic detectives do</p> <p>9 their job. So I took a part in surveillance</p> <p>10 activities, I took a part in controlled</p> <p>11 purchases, as an observer and as part of the</p> <p>12 surveillance team.</p> <p>13 Q. And at the end of your period as a</p> <p>14 patrolman, what was the next thing you did in</p> <p>15 the police department?</p> <p>16 A. So I was in the fourth district for</p> <p>17 approximately eight years. I think it was July</p> <p>18 of 1998, right around there, it was the summer,</p> <p>19 early fall of 1998, I was transferred to the</p> <p>20 second district.</p> <p>21 So I worked in the second district</p> <p>22 as a patrolman for, I think, three or four</p> <p>23 months, and I received an assignment to the</p> <p>24 strike force unit in the second district. So I</p> <p>25 was assigned as a detective in the strike force</p>
<p style="text-align: right;">Page 23</p> <p>1 district --</p> <p>2 A. The fourth district.</p> <p>3 Q. Excuse me. The fourth district,</p> <p>4 what did you -- what did your job generally</p> <p>5 consist of?</p> <p>6 A. We would be responsible for a zone.</p> <p>7 So the city is broken down -- at the time it</p> <p>8 was broken down into six districts, and the</p> <p>9 districts were broken down into zones, and an</p> <p>10 individual car, with two partners in it, would</p> <p>11 be assigned to a zone.</p> <p>12 So you would be responsible for</p> <p>13 patrolling your zone for crime, you know, to be</p> <p>14 visible, then you would also answer radio calls</p> <p>15 for service.</p> <p>16 Q. Is there anything else -- so this</p> <p>17 was approximately eight years you did this?</p> <p>18 A. For approximately, yeah, probably</p> <p>19 just short of eight years, I would say.</p> <p>20 Q. Was there anything else you did as</p> <p>21 a patrolman?</p> <p>22 A. I was detailed to the narcotics</p> <p>23 unit, maybe 1993 or so, for, I think it was, 60</p> <p>24 days. I was detailed to the vice unit during</p> <p>25 that time as well, and for 60 or 90 days as</p>	<p style="text-align: right;">Page 25</p> <p>1 uni.</p> <p>2 Q. And what is basically a strike</p> <p>3 force unit?</p> <p>4 A. A strike force unit is basically a</p> <p>5 group of detectives that handle sort of like</p> <p>6 pattern crimes. So if there is, like in the</p> <p>7 case of the second district, if there is a</p> <p>8 large amount of burglaries in one area, then we</p> <p>9 would focus on the burglaries. If there is a</p> <p>10 large of amount of auto thefts, then we would</p> <p>11 move and focus on the auto thefts to find out</p> <p>12 who was, you know, committing those crimes and</p> <p>13 arrest them.</p> <p>14 Q. Were you still a patrolman at that</p> <p>15 point?</p> <p>16 A. No, at that point, that's when you</p> <p>17 become a detective.</p> <p>18 Q. Is that a promotion?</p> <p>19 A. It is not a promotion. It is a</p> <p>20 lateral assignment.</p> <p>21 Q. And how long were we with the</p> <p>22 strike force unit?</p> <p>23 A. Approximately two years.</p> <p>24 Q. And at the end of that two years,</p> <p>25 what changed?</p>

<p style="text-align: right;">Page 26</p> <p>1 A. I was promoted to sergeant, and I 2 was transferred to the third district. I was 3 assigned to the third district detective bureau 4 as a detective sergeant. 5 Q. And was there an exam or something 6 you had to take? 7 A. Yes. There is a competitive exam 8 that anyone -- any patrolman that wants to be 9 promoted to sergeant has to take. 10 Q. And after you were promoted and 11 sent to the third district, what was your job 12 at that point? 13 A. So my job was -- there was a 14 lieutenant and a sergeant assigned to the 15 bureau. So I was the sergeant assigned to the 16 bureau, working under the lieutenant. My job 17 would be to review all the felony cases that 18 came into the detective bureau and assign those 19 cases to the detectives to follow up on. 20 Q. Did it include narcotics cases? 21 A. It did not. 22 Q. Those were handled in a separate 23 unit? 24 A. It would be handled by the narcotic 25 unit or the vice unit.</p>	<p style="text-align: right;">Page 28</p> <p>1 district on afternoon shift, so that would be 2 the, like, 3:00 to 11:00, basically, shift. 3 Q. And then what? 4 A. I took over the strike force unit 5 as lieutenant and the -- they call the CSU 6 unit, community service unit. So a community 7 service unit had two sergeants, but there was 8 not a sergeant assigned to the strike force 9 unit. They put me in charge of that. 10 I think they had -- the lieutenant 11 in charge of the bureau was kind of doing 12 lateral duty, where he was covering the strike 13 force unit as well. 14 So they put me in charge of the 15 strike force unit then and the community 16 services unit. 17 Q. What did the community services 18 unit do? 19 A. They helped out with like hotspots 20 in the city. So if the district was having a 21 problem with gang members on a street corner or 22 high-drug-activity area, they would send those 23 uniformed officers in to flood the area, to 24 kind of like -- kind of like quell any kind of 25 bad activity that was going on.</p>
<p style="text-align: right;">Page 27</p> <p>1 Q. So how long did you have that 2 assignment? 3 A. Just over one year, as the 4 detective bureau sergeant, and then I was 5 transferred to be the sergeant of the strike 6 force unit, in the third district as well, 7 stayed in the third district. 8 Q. And how long were you with the 9 strike force unit at that time? 10 A. Approximately one more year after 11 that. 12 Q. What happened next? 13 A. I tested and was promoted to 14 lieutenant. 15 Q. What year was that? 16 A. I think 2002. 17 Q. And after you were promoted, what 18 was your assignment? 19 A. I was assigned -- I was reassigned 20 back to the fourth district, and I was a patrol 21 supervisor, so I would have been the OIC of 22 second shift. 23 Q. How long did you have that role? 24 A. I think it was just over a year 25 that I was a patrol supervisor in the fourth</p>	<p style="text-align: right;">Page 29</p> <p>1 If there was like a street fair or 2 something like that, they would also go in 3 uniform and assist with security at the fairs, 4 or if there was a political rally, they would 5 go and assist with that. So it was more or 6 less the commander's group of guys that he can 7 send anywhere in his -- in his district to 8 handle his problems. 9 Q. And who did you report to? 10 A. Directly to the commander. 11 Q. And who was the commander at that 12 time? 13 A. Initially it was Mike McGrath, so 14 Mike McGrath would have been the commander. 15 Q. And how did the -- was the 16 commander the next tier up above lieutenant, or 17 was there something in between? 18 A. There is a captain that would 19 normally be between the commander and the 20 lieutenant, but I think at that time there 21 wasn't a captain assigned. And if there was, I 22 don't recall who it was. I'm sorry. 23 Q. All right. So how long were you in 24 the role of overseeing the community services 25 unit and the strike force?</p>



<p style="text-align: right;">Page 30</p> <p>1 A. So I would say for another year I 2 did that alone, and then eventually I took over 3 the detective bureau as well. 4 So I was in the fourth district 5 from 2002 to late 2005, and I worked patrol, I 6 took over the strike force in the community 7 services unit, then eventually I took over the 8 detective bureau and the vice units. So I was 9 kind of like the lieutenant over all of them. 10 Q. And then what happened at the end 11 of 2005? 12 A. In 2005, I was reassigned to 13 narcotics, and I think that was July or August 14 of 2005. 15 Q. And have you been in narcotics 16 consistently since then? 17 A. Yes. 18 Q. Well, in the early period, when you 19 were first assigned, what was your role? 20 A. When I first was assigned there, my 21 role -- we kind of -- after we -- we kind of 22 like backfilled, we were short people. So we 23 did a lot of interviews, and we added personnel 24 to narcotics, and eventually we set up two 25 distinct squads. So there was an east side</p>	<p style="text-align: right;">Page 32</p> <p>1 A. I don't remember exactly when it 2 changed. 3 Q. Do you know roughly when it did? 4 A. I don't remember. 5 Q. Okay. Well, going back to when you 6 were overseeing the east side squad, who were 7 you reporting to at that time? 8 A. Captain Brian Heffernan. 9 Q. And how long did you report to 10 Captain Heffernan? 11 A. From the day I was assigned to 12 narcotics, so that would be 2005, until Captain 13 Heffernan was reassigned. He was promoted 14 commander. That would have been maybe 2013, 15 2014 -- maybe 2014. 16 Q. Approximately? 17 A. Correct. 18 Q. So after you -- at some point in 19 there, was it during his tenure that the 20 transition from east side/west side to street 21 and major case squads occurred? 22 A. That's correct. 23 Q. And how long did you continue in 24 that role? 25 A. For about maybe a year or so. The</p>
<p style="text-align: right;">Page 31</p> <p>1 squad and a west side squad. So I was the 2 lieutenant in charge of the east side squad, so 3 my primary responsibility would have been the 4 east side of the city. 5 Q. And what was the reason for 6 dividing it into those two squads? 7 A. I just think it was easy to manage, 8 and the east side and the west side of the 9 city, you know, is basically separated by the 10 river, so it just kind of like made it easy to 11 manage that way. We had two lieutenants, and 12 that's just how it ended up. 13 So I did the -- I took the east 14 side squad. Eventually, I took over what they 15 want to call -- what you want to call -- I 16 don't know what you would call it, but like the 17 major case squad. So they had more of a street 18 squad after that, and they kind of like changed 19 their methods. They had sort of a street 20 squad, and then a major case squad, so I was 21 assigned to the major case squad. 22 Q. And was that in place of the east 23 side/west side? 24 A. Yes, that's correct. 25 Q. When did that change?</p>	<p style="text-align: right;">Page 33</p> <p>1 narcotics unit was kind of changing, it was 2 evolving during that time. We added another 3 squad, we started focus -- some of the 4 detectives started focusing on some gang 5 activity. So there was some changing. It was 6 kind of like fluid at that time. 7 Q. And you said you added another 8 squad. What was that one for? 9 A. And they did more of street work. 10 They assisted the vice units. 11 Q. And at that point, what were you 12 overseeing? 13 A. My job hadn't changed. I was still 14 doing basically what they would call the major 15 case squad. 16 Q. When you were overseeing the major 17 case squad, how many police officers were 18 reporting to you? 19 A. It probably fluctuated anywhere 20 from seven to ten, depending on, you know, the 21 date and people's assignments. 22 Q. Were there any sergeants involved 23 in there? 24 A. At one point, I had one sergeant 25 assigned to me, but then they ended up giving</p>

<p style="text-align: right;">Page 34</p> <p>1 him, like, part of the street squad 2 responsibilities. 3 Q. So after, you said, it was about a 4 year, what happened at the end of that year? 5 A. Well, in 2011, I was transferred to 6 the OIC, or the commander of the Northern Ohio 7 Law Enforcement Task Force. 8 Q. As the OIC to the -- 9 A. I'm sorry. I think the actual 10 title is commander. 11 Q. Okay. So the commander, I just 12 want to make sure I get this right, commander 13 of the Northern -- 14 A. Northern Ohio Law Enforcement Task 15 Force. 16 Q. And who made the decision for that 17 transfer? 18 A. Commander Gingell. 19 Q. And what was the Northern Ohio Law 20 Enforcement Task Force? 21 A. So the Northern Ohio Law 22 Enforcement Task Force is an FBI task force, 23 which is co-led by Cleveland police and FBI, 24 and it is group of federal, state, county and 25 local law enforcement agencies, who pool all</p>	<p style="text-align: right;">Page 36</p> <p>1 A. Yes, I have. 2 Q. By whom? 3 A. The FBI. 4 Q. And at what time did that happen? 5 A. Shortly after my -- I would say 6 within a month of my assignment to the task 7 force. 8 Q. Did the FBI pay you? 9 A. They did not. 10 Q. Has anyone other than Cleveland 11 police paid you? 12 A. No. 13 Q. When you transferred in 2011 as the 14 commander, had the task force been in place 15 before that? 16 A. Yes. 17 Q. And so were you taking somebody 18 else's place? 19 A. Yes. The lieutenant that was in 20 charge of the task force was promoted to 21 commander, and he was reassigned to the third 22 district for the City of Cleveland. So there 23 was a vacancy. 24 Q. And what was his name? 25 A. Pat Stephens.</p>
<p style="text-align: right;">Page 35</p> <p>1 those resources together to combat drugs and 2 violent -- violent crimes. 3 Q. So its focus was outside -- went 4 beyond just drugs? 5 A. Our primary focus was drugs, but 6 our secondary focus would have been violent 7 crime. 8 Q. And when you were transferred, to 9 what role were you transferred at that time? 10 A. I became the commander of the task 11 force. So there is an FBI commander and there 12 is a Cleveland police commander, so I have a 13 co-command with an FBI supervisor. 14 Q. And at that time were you still 15 employed by Cleveland police? 16 A. Yes, and I still am employed by 17 Cleveland police. 18 Q. Has that ever changed? 19 A. No. 20 Q. Have you ever been -- during the 21 period since 2011, have you ever been employed 22 by anyone else? 23 A. I have not. 24 Q. Have you ever been sort of 25 deputized or --</p>	<p style="text-align: right;">Page 37</p> <p>1 Q. Is he still with the Cleveland 2 police? 3 A. He is not. He's retired. 4 Q. When did he retire? 5 A. Maybe two years ago. 6 Q. Now, as the -- were there any -- 7 after 2011, were there any changes, further 8 changes in your position or your role? 9 A. No. I have been there since 2011. 10 Q. Have you had any other job 11 responsibilities with the Cleveland police? 12 A. In 2016, I was asked to come back 13 and assist the narcotics unit with their Heroin 14 Involved Death Investigation team. They call 15 it HIDI. 16 Q. Were you taking somebody else's 17 place? 18 A. There was a Lieutenant Purcell 19 assigned to narcotics, and I think Lieutenant 20 Pipoly, both of them were assigned to 21 narcotics. I know Lieutenant Purcell was, I 22 believe, the last lieutenant in charge. He was 23 promoted to captain, and they had not filled 24 his position in narcotics, so there was a 25 vacant position for lieutenant.</p>

<p style="text-align: right;">Page 38</p> <p>1 So there was a vacancy, and they</p> <p>2 still have not filled it to this day. So I</p> <p>3 think that's why the commander had asked me to</p> <p>4 come over and assist.</p> <p>5 Q. And what was -- after Captain</p> <p>6 Heffernan left, who took his place?</p> <p>7 A. Lieutenant Purcell.</p> <p>8 Q. From 2011 on, who did you report</p> <p>9 to?</p> <p>10 A. Commander Gingell.</p> <p>11 Q. Has that been consistent throughout</p> <p>12 that time?</p> <p>13 A. Yes.</p> <p>14 Q. Has there been any captain involved</p> <p>15 in that chain?</p> <p>16 A. No. Captain Heffernan was the only</p> <p>17 captain. They replaced him with Lieutenant</p> <p>18 Purcell.</p> <p>19 Q. And you never reported to</p> <p>20 Lieutenant Purcell?</p> <p>21 A. No. We are lateral, so we would be</p> <p>22 the same.</p> <p>23 Q. So after Captain Heffernan left,</p> <p>24 you started reporting directly to the</p> <p>25 commander?</p>	<p style="text-align: right;">Page 40</p> <p>1 Q. Do you still work there?</p> <p>2 A. No.</p> <p>3 Q. I thought you gave a different</p> <p>4 address.</p> <p>5 A. That's the Cleveland police</p> <p>6 headquarters.</p> <p>7 Q. Okay. Do you have an office there?</p> <p>8 A. In the Cleveland police</p> <p>9 headquarters?</p> <p>10 Q. Yes.</p> <p>11 A. I do not.</p> <p>12 Q. Do you have an office anywhere</p> <p>13 other than 801 West Superior?</p> <p>14 A. I have an office at 2001 Payne</p> <p>15 Avenue, Cleveland, Ohio.</p> <p>16 Q. And what is there?</p> <p>17 A. That's the called Public Safety</p> <p>18 Central. It's the old Cleveland police</p> <p>19 headquarters. They moved -- they moved our</p> <p>20 whole section from the main Cleveland police</p> <p>21 headquarters into Payne temporarily, while the</p> <p>22 city was looking for a new Cleveland police</p> <p>23 headquarters. So it's a temporary office.</p> <p>24 Q. When did that happen?</p> <p>25 A. About a year ago.</p>
<p style="text-align: right;">Page 39</p> <p>1 A. Correct.</p> <p>2 Q. And was that Commander Gingell?</p> <p>3 A. Gingell.</p> <p>4 Q. How long had he been there?</p> <p>5 A. He started the same -- he took the</p> <p>6 position of commander maybe a month or less</p> <p>7 before I started in the narcotics unit.</p> <p>8 So when he took over, he brought in</p> <p>9 commander -- I'm sorry, he brought in Captain</p> <p>10 Heffernan and myself at the same time.</p> <p>11 Q. Now, during the time that you have</p> <p>12 been with the Northern Ohio Law Enforcement</p> <p>13 Task Force, have you continued to be a member</p> <p>14 of the narcotics unit of the Cleveland police?</p> <p>15 A. So, yeah, I guess you would say I</p> <p>16 have been, yes.</p> <p>17 Q. Where, in 2011, where did you work</p> <p>18 from?</p> <p>19 MS. ZIMMERMANN: Object to form.</p> <p>20 You may answer, Lieutenant.</p> <p>21 A. 801 West Superior, the U.S. Federal</p> <p>22 courthouse.</p> <p>23 Q. And how long did you continue to</p> <p>24 work out of there?</p> <p>25 A. Until today.</p>	<p style="text-align: right;">Page 41</p> <p>1 Q. Before that did you have an office</p> <p>2 in the Cleveland police headquarters?</p> <p>3 A. I did not.</p> <p>4 Q. So in 2014, for example, was the</p> <p>5 only place you had an office 801 West Superior</p> <p>6 or did --</p> <p>7 A. Pardon me? What did you say?</p> <p>8 Q. In 2014, for example --</p> <p>9 A. Yes.</p> <p>10 Q. -- did you have an office in just</p> <p>11 one location or more than one location?</p> <p>12 A. Just one.</p> <p>13 Q. When you came back to work on the</p> <p>14 Heroin Involved Death Investigations team in</p> <p>15 2016, where did you operate from for that</p> <p>16 function?</p> <p>17 A. Well, it was not my only</p> <p>18 assignment, so I still was working for the</p> <p>19 Northern Ohio Law Enforcement Task Force, so I</p> <p>20 was really wearing two hats. I was basically</p> <p>21 overseeing the death investigators or over</p> <p>22 those investigators. There was a sergeant,</p> <p>23 Sergeant Mike Ward was there as a sergeant, and</p> <p>24 then I brought Sergeant Joseph Bovenzi over to</p> <p>25 assist as well.</p>

<p style="text-align: right;">Page 42</p> <p>1 Q. And when you were doing that work, 2 where were you physically working from? 3 A. Well, 90 percent of the time, I was 4 still at my office at the task force. And then 5 I would go over there and check in and oversee, 6 you know, what was happening there in between. 7 Q. How far apart physically are those 8 locations? 9 A. Well, when it initially happened, 10 you know, The Justice Center is right there, 11 and the Federal courthouse, you could see it, 12 it is half a mile, it's a 15-minute walk, and 13 now the offices are maybe two miles apart. 14 Q. I'm just trying to figure out, when 15 you needed to check in with your team on the 16 HIDI work, did you walk over, or how did you 17 interact with them? 18 A. Many times I walked over. 19 Depending on where I was. If I was in my 20 office, I would walk over, because it was 21 easier, as far as parking consideration, it is 22 easier to walk, and if I was coming from 23 somewhere else, I would obviously drive. 24 Q. Were any other Cleveland police 25 officers also involved with the Northern Ohio</p>	<p style="text-align: right;">Page 44</p> <p>1 went back. 2 Q. And then you were back to three? 3 A. Correct. No, no, four, because 4 Detective Clark was there at the time. 5 Q. Oh, I'm sorry. Okay. 6 And after Detective Clark left, did 7 you stay at three up until today? 8 A. Correct. 9 THE NOTARY: Please wait until 10 she's finished. Thank you. 11 Q. You and I both have to be more 12 careful about that. 13 How many people, how many 14 detectives or other police officers have 15 reported to you in the HIDI function? 16 MS. ZIMMERMANN: Object to form. 17 You may answer, Lieutenant. 18 A. I believe there was five 19 detectives. There was initially five 20 detectives assigned. Sergeant Ward was 21 assigned and Sergeant Bovenzi. 22 Q. So that would be six? 23 A. Five detectives and two sergeants. 24 Q. Any other employees work with the 25 unit?</p>
<p style="text-align: right;">Page 43</p> <p>1 Law Enforcement Task Force while you were 2 there? 3 A. Yes. 4 Q. Has that changed over time? 5 A. Yes. 6 Q. Well, at the beginning, how many 7 were there? 8 A. In the beginning, there were four, 9 four detectives. Yeah, four detectives. 10 Q. And how did that change? 11 A. Detective, I think it was Detective 12 Clark eventually went back to narcotics, and 13 then he was promoted shortly after and left the 14 unit. 15 Q. So you were down to three? 16 A. We were down to three. There was a 17 period of time that we had two extra guys, but 18 it was only for six months or so, and they 19 ended up having to go back to the narcotics 20 unit. I think it was a manpower issue, they 21 needed more manpower in narcotics. 22 So I had them for a little while, 23 but it was a very short period, and I can't 24 tell you the exact dates on that, but I'm going 25 to say six or seven months only, and then they</p>	<p style="text-align: right;">Page 45</p> <p>1 A. No. 2 Q. During the course of your time with 3 the Cleveland Division of Police, have you ever 4 had responsibility for the establishment of 5 policies relating to drug enforcement? 6 A. No. 7 Q. Have you ever had responsibilities 8 for policies relating to drug response? 9 A. No. 10 Q. Have you ever had any 11 responsibilities for budget? 12 A. Only as it concerns the task force 13 budget. 14 Q. And what is your role with respect 15 to the task force budget? 16 A. I oversee -- there's grants, there 17 is two grants that we use to fund task force 18 operations. So I oversee the budgets of those 19 grants. So the budget is set, but when the 20 grants come, I'm the one that oversees the 21 day-to-day expenses. 22 Q. Do you have any responsibility for 23 putting together the grant applications? 24 A. No. I assist the grants 25 coordinator but -- her name is Dawn Heartsong,</p>



<p style="text-align: right;">Page 46</p> <p>1 but I do not complete the grant.</p> <p>2 Q. How do pronounce -- spell her last</p> <p>3 name?</p> <p>4 A. Heartsong, I believe it is</p> <p>5 H-E-A-R-T-S-O-N-G.</p> <p>6 Q. What are the two grants?</p> <p>7 A. The Justice Assistance Grant and</p> <p>8 the Ohio Drug Law Enforcement Grant.</p> <p>9 MS. WINNER: We will deal with that</p> <p>10 at the break.</p> <p>11 Q. The justice assistance grant, who</p> <p>12 gives that grant?</p> <p>13 A. It's a pass-through agency. I</p> <p>14 think it is the State of Ohio is where both of</p> <p>15 the grants come through.</p> <p>16 Q. And who is the decisionmaker on the</p> <p>17 award of those grants?</p> <p>18 A. I can't think of the name, off the</p> <p>19 top of my head. I'm sorry.</p> <p>20 Q. But Dawn Heartsong would be the</p> <p>21 person who knows about that?</p> <p>22 A. Yes, ma'am.</p> <p>23 Q. Do you have any involvement in any</p> <p>24 other aspect of the budget for the task force?</p> <p>25 A. I'm not really clear on the</p>	<p style="text-align: right;">Page 48</p> <p>1 paid to Cleveland for expenditures, or is it</p> <p>2 money that is used by the federal side of the</p> <p>3 task force?</p> <p>4 A. It is not paid to Cleveland</p> <p>5 directly. They have their own fiduciary. So</p> <p>6 Cleveland does not -- it does not pass through</p> <p>7 the City of Cleveland. So I guess the answer</p> <p>8 would be no.</p> <p>9 Q. But the Justice Assistance Grant</p> <p>10 and the Ohio Drug Law Enforcement Fund grants</p> <p>11 do come through Cleveland?</p> <p>12 A. Correct.</p> <p>13 Q. In the course of your</p> <p>14 responsibility for the Northern Ohio Law</p> <p>15 Enforcement Task Force, to whom do you report?</p> <p>16 A. Commander Gingell.</p> <p>17 Q. Do you report to anybody on the</p> <p>18 Federal side for that?</p> <p>19 A. It would be the assistant agent in</p> <p>20 charge of the FBI.</p> <p>21 Q. Do you report to that person, or</p> <p>22 does your co-commander report to that person?</p> <p>23 A. My co-commander reports to him, but</p> <p>24 if he would call me, I would report to him as</p> <p>25 well, so...</p>
<p style="text-align: right;">Page 47</p> <p>1 question.</p> <p>2 Q. Well, maybe because I should have</p> <p>3 asked another question first.</p> <p>4 Does the task force have its own</p> <p>5 budget?</p> <p>6 A. Only -- well, we have the grants,</p> <p>7 and then we have another budget that comes from</p> <p>8 HIDTA, which is the High Intensity Drug</p> <p>9 Trafficking Area.</p> <p>10 Q. And who puts that budget together?</p> <p>11 A. The Office of National Drug Control</p> <p>12 Policy.</p> <p>13 Q. And that's federal money, right?</p> <p>14 A. That's federal money. Excuse me.</p> <p>15 The JAG grant is also federal money.</p> <p>16 Q. So the Justice Assistance Grant is</p> <p>17 federal money --</p> <p>18 A. Right.</p> <p>19 Q. -- but it is funneled through the</p> <p>20 state?</p> <p>21 A. Correct.</p> <p>22 Q. And then the Ohio Drug Law</p> <p>23 Enforcement Fund money is state money?</p> <p>24 A. Correct.</p> <p>25 Q. Is the HIDTA money money that is</p>	<p style="text-align: right;">Page 49</p> <p>1 Q. I asked you earlier what you</p> <p>2 understood an opioid to be, and you gave me an</p> <p>3 answer.</p> <p>4 Does the term "prescription</p> <p>5 opioids" have a meaning for you?</p> <p>6 A. It would mean an opioid that was</p> <p>7 prescribed by a medical doctor.</p> <p>8 Q. Is a -- can you give me an example</p> <p>9 of a prescription opioid?</p> <p>10 A. Percocet.</p> <p>11 Q. Percocet. Is Percocet -- would</p> <p>12 Percocet be classified as a prescription</p> <p>13 opioid, if it was obtained illegally?</p> <p>14 MS. ZIMMERMANN: Object to form.</p> <p>15 A. Yes.</p> <p>16 Q. I just want to make sure that you</p> <p>17 and I are using our terminology the same way.</p> <p>18 Okay. So you would still classify</p> <p>19 it as a prescription opioid, even if there</p> <p>20 wasn't actually a prescription involved?</p> <p>21 A. It would be an illegally obtained</p> <p>22 prescription opioid, right.</p> <p>23 Q. Are there particular prescription</p> <p>24 opioids that you have encountered with some</p> <p>25 frequency in the course of your work?</p>

<p style="text-align: right;">Page 50</p> <p>1 A. Yes.</p> <p>2 Q. And can you tell me what those are?</p> <p>3 A. Percocet, percodan, OxyContin, off</p> <p>4 the top of my head.</p> <p>5 Q. Are those the main ones?</p> <p>6 A. Those are the main ones that come</p> <p>7 to my head.</p> <p>8 Q. And is that because those</p> <p>9 are -- you have encountered those being sold</p> <p>10 illegally?</p> <p>11 A. Yes.</p> <p>12 Q. Have you encountered them for any</p> <p>13 other reasons?</p> <p>14 A. Have I personally encountered them</p> <p>15 for any other reasons?</p> <p>16 Q. I'm not asking you about your</p> <p>17 personal life experience, but in the course of</p> <p>18 your work.</p> <p>19 A. I'm sorry. Could you clarify.</p> <p>20 Q. Sure. Well, I'll come back to</p> <p>21 that. It's a little awkward the way I asked</p> <p>22 it. Let me change the subject.</p> <p>23 You have been identified -- well,</p> <p>24 first of all, do you know what this lawsuit is</p> <p>25 about?</p>	<p style="text-align: right;">Page 52</p> <p>1 the only time.</p> <p>2 Q. Had you been aware of the case</p> <p>3 before that?</p> <p>4 A. Yes, in general terms.</p> <p>5 Q. And had you ever discussed the case</p> <p>6 with anyone other than counsel?</p> <p>7 A. No.</p> <p>8 Q. Have you ever discussed the case</p> <p>9 with Commander Gingell?</p> <p>10 A. Just the fact that I was coming</p> <p>11 here today. Nothing specifically.</p> <p>12 Q. All right. Well, in the course of</p> <p>13 various papers filed in this case, the city has</p> <p>14 described you as, first of all, as the deputy</p> <p>15 of Commander Gingell of the narcotics unit. Do</p> <p>16 you think that's accurate?</p> <p>17 A. I mean, in terms of being a deputy,</p> <p>18 I guess that means I would be his assistant,</p> <p>19 but that's not normally what my title would be.</p> <p>20 Q. Leaving aside formal titles, is</p> <p>21 that an accurate description of your role, do</p> <p>22 you think?</p> <p>23 A. My role has never been described</p> <p>24 that way, so I don't know if that would be</p> <p>25 accurate.</p>
<p style="text-align: right;">Page 51</p> <p>1 A. Generally I do, yes.</p> <p>2 Q. What do you know about it?</p> <p>3 A. It's my understanding that the City</p> <p>4 of Cleveland and the county, and I think it is</p> <p>5 Akron and Summit County are suing</p> <p>6 manufacturers, distributors, maybe -- I'm not</p> <p>7 sure if doctors are involved, because they feel</p> <p>8 that they misled people into believing that</p> <p>9 opioids were not addictive, and basically piled</p> <p>10 them into the community and caused addiction.</p> <p>11 That's, kind of, my general knowledge of it.</p> <p>12 Q. Have you ever seen the complaint</p> <p>13 that was filed in this case?</p> <p>14 A. I did review the complaint.</p> <p>15 Q. You read the whole thing?</p> <p>16 A. No, no. I didn't read it. I said</p> <p>17 I reviewed it.</p> <p>18 Q. How much of it did you actually</p> <p>19 read?</p> <p>20 A. I just skimmed through the</p> <p>21 document. So I couldn't give you a percentage,</p> <p>22 but maybe 10 percent of 400 pages or so.</p> <p>23 Q. When did you read it -- or review</p> <p>24 it, excuse me?</p> <p>25 A. I think yesterday would have been</p>	<p style="text-align: right;">Page 53</p> <p>1 Q. Well, how would you describe your</p> <p>2 role, vis-a-vis Commander Gingell?</p> <p>3 A. He's my direct supervisor. I</p> <p>4 report to him. I keep him informed of my</p> <p>5 activities, our cases, my personnel issues, my</p> <p>6 administrative issues. He supports, you know,</p> <p>7 our investigations.</p> <p>8 Q. Does he have a de facto number two?</p> <p>9 A. That would be me.</p> <p>10 Q. Now, I assume that there are a lot</p> <p>11 of things that the narcotics unit does, other</p> <p>12 than the two specific roles that you are</p> <p>13 involved in, correct?</p> <p>14 A. There are other aspects of the</p> <p>15 narcotics unit, correct.</p> <p>16 Q. Are you involved in those other</p> <p>17 aspects?</p> <p>18 A. You would have to specifically ask</p> <p>19 me which aspects, and I could tell you.</p> <p>20 Q. Okay. Well --</p> <p>21 A. Because there is too much going on.</p> <p>22 Q. Other than the Northern Ohio Law</p> <p>23 Enforcement Task Force --</p> <p>24 A. Right.</p> <p>25 Q. -- and the HIDT?</p>



<p style="text-align: right;">Page 54</p> <p>1 A. The HIDI squad, right.</p> <p>2 Q. HIDI squad, what else does the</p> <p>3 narcotics unit do?</p> <p>4 A. So there is another squad --</p> <p>5 actually, there is not another squad. There is</p> <p>6 another unit. It's called the package</p> <p>7 interdiction team. I take that back, hotel</p> <p>8 interdiction team, H-I-T, and that's a HIDTA</p> <p>9 initiative. Sergeant Joseph Bovenzi is the</p> <p>10 supervisor.</p> <p>11 There is one Cleveland police</p> <p>12 officer assigned, that would be Patrick</p> <p>13 Andrejcek, he's a K9 officer, and the other</p> <p>14 members are all suburban police departments and</p> <p>15 federal agents.</p> <p>16 Q. What does the narcotics unit do?</p> <p>17 A. They also are involved in packages.</p> <p>18 We used to have a package interdiction team,</p> <p>19 now it's, more or less, you know, they'll call</p> <p>20 to see who is available to assist. So that's</p> <p>21 an effort that we work with postal and the</p> <p>22 postal inspectors.</p> <p>23 Q. And that is to inspect or interdict</p> <p>24 packages that contain illegal narcotics?</p> <p>25 A. That's correct.</p>	<p style="text-align: right;">Page 56</p> <p>1 hotels to set up drug transactions or to</p> <p>2 transfer money that may be part of a drug deal</p> <p>3 in and out of the city, or, actually, not just</p> <p>4 the city, it would be the whole county, you</p> <p>5 know, basically Greater Cleveland area.</p> <p>6 Q. Is there a particular group within</p> <p>7 narcotics that is responsible for investigating</p> <p>8 heroin dealers?</p> <p>9 A. So, excuse me, the HIDI squad, the</p> <p>10 Heroin Involved Death Investigations squad,</p> <p>11 that would be their primary job would be to</p> <p>12 investigate the dealers that are selling the</p> <p>13 heroin or fentanyl or whatever that is creating</p> <p>14 an overdose.</p> <p>15 Q. What about drug dealers who</p> <p>16 don't -- aren't linked to an overdose, does</p> <p>17 anybody investigate them?</p> <p>18 A. In the narcotics unit?</p> <p>19 Q. Yes.</p> <p>20 A. Very rarely.</p> <p>21 Q. Really?</p> <p>22 A. And that's because all of our</p> <p>23 efforts are being focused on the fatalities and the</p> <p>24 nonfatal overdoses.</p> <p>25 Q. How long has that been the case?</p>
<p style="text-align: right;">Page 55</p> <p>1 Q. Or other drugs?</p> <p>2 A. Or other drugs, correct, as long as</p> <p>3 they are being sent illegally. We don't</p> <p>4 interdict legally, if legal drugs are being</p> <p>5 mailed.</p> <p>6 That being said, we also have</p> <p>7 officers assigned to Homeland Security</p> <p>8 investigation.</p> <p>9 Q. What else?</p> <p>10 A. We have compliance, which is the --</p> <p>11 basically the pill investigations. We have a</p> <p>12 task force officer assigned to the DEA. We</p> <p>13 also -- it's not an initiative, but we also</p> <p>14 assist or work cases sometimes in conjunction</p> <p>15 with the DEA. Even though it's not a task</p> <p>16 force or it's not a group, you know, the DEA</p> <p>17 and, I'm sorry, the narcotics unit will work</p> <p>18 together on occasion, even though it's not a</p> <p>19 formal operation.</p> <p>20 What else from narcotics? And I</p> <p>21 think that's it, that I can remember.</p> <p>22 Q. What does the hotel interdiction</p> <p>23 team do?</p> <p>24 A. So their primary mission is to</p> <p>25 interdict drug dealers that are using local</p>	<p style="text-align: right;">Page 57</p> <p>1 A. My guess is 2015.</p> <p>2 Q. Before then, was there somebody who</p> <p>3 investigated drug dealers without an overdose</p> <p>4 connection?</p> <p>5 A. That is correct. Before that,</p> <p>6 before the HIDI team basically was created, the</p> <p>7 narcotics unit's primary mission was to</p> <p>8 investigate any drug complaint that came their</p> <p>9 way, whether it was heroin, cocaine, pills, you</p> <p>10 know, they would take any and all comers.</p> <p>11 Now we are focused entirely on the</p> <p>12 overdose problem.</p> <p>13 Q. So if somebody called the police</p> <p>14 and said, "I think my neighbor down the street</p> <p>15 is selling heroin out of their house," would</p> <p>16 anybody respond to that?</p> <p>17 A. We would probably redirect that</p> <p>18 information to the districts and have a vice</p> <p>19 unit do the follow-up, unless the investigators</p> <p>20 on the HIDI squad felt like either they had</p> <p>21 time to investigate it or it was possibly</p> <p>22 related to one of their investigations.</p> <p>23 Q. What does the compliance unit do?</p> <p>24 A. They basically follow up on pill</p> <p>25 cases.</p>

<p style="text-align: right;">Page 58</p> <p>1 Q. What are pill cases?</p> <p>2 A. So prescription -- we call it</p> <p>3 diversion, so it would either be illegally</p> <p>4 obtained prescriptions.</p> <p>5 Q. And how do people illegally obtain</p> <p>6 prescriptions?</p> <p>7 A. They can write a fake script, they</p> <p>8 can steal grandma's prescriptions, they can go</p> <p>9 to a doctor that is writing prescriptions</p> <p>10 illegally, they can buy illegal prescriptions</p> <p>11 from a drug dealer on the corner. There is a</p> <p>12 very -- there is a variety of ways to obtain</p> <p>13 them.</p> <p>14 Q. And does the compliance unit look</p> <p>15 into all of those things?</p> <p>16 A. They do, you know, within their</p> <p>17 limitations, because there is only a couple of</p> <p>18 them. So if I can explain really quickly, any</p> <p>19 one of these units, if they would need help,</p> <p>20 they can ask for help from the general squad.</p> <p>21 Q. How many people are in the</p> <p>22 compliance unit?</p> <p>23 A. Two.</p> <p>24 Q. Has that changed over time?</p> <p>25 A. It's either been one or two</p>	<p style="text-align: right;">Page 60</p> <p>1 assigned to narcotics, and then Detective</p> <p>2 Patina, approximately two years.</p> <p>3 Q. And was there somebody else in that</p> <p>4 role before Detective Patina?</p> <p>5 A. I think Detective Whitney was there</p> <p>6 before Prince -- or maybe with Prince, but not</p> <p>7 Patina.</p> <p>8 Q. So before Detective Patina was</p> <p>9 there -- you said that that was about two</p> <p>10 years. Was there somebody -- was Detective</p> <p>11 Prince alone, or was there --</p> <p>12 A. Correct.</p> <p>13 Q. For how long?</p> <p>14 A. A couple years. I can't give you</p> <p>15 an exact number. I just don't remember.</p> <p>16 Q. Has the size of the narcotics unit</p> <p>17 changed, during the time you have been there?</p> <p>18 A. Yes.</p> <p>19 Q. And how has it changed?</p> <p>20 A. When I first arrived, there was, I</p> <p>21 would say, maybe under ten officers or</p> <p>22 detectives. We grew the size of the unit to</p> <p>23 approximately 30, and I think now it's back to</p> <p>24 around ten or 12 detectives.</p> <p>25 Q. And when was it at 30?</p>
<p style="text-align: right;">Page 59</p> <p>1 detectives assigned, as far back as I can</p> <p>2 remember.</p> <p>3 MS. ZIMMERMANN: Counselor, I think</p> <p>4 we will need a ten-minute break.</p> <p>5 MS. WINNER: Oh, sure. No problem.</p> <p>6 Q. Is this a good time for you?</p> <p>7 A. It is.</p> <p>8 THE VIDEOGRAPHER: Off the record</p> <p>9 at 9:59.</p> <p>10 (Recess taken.)</p> <p>11 THE VIDEOGRAPHER: On the record,</p> <p>12 10:15.</p> <p>13 Q. Okay. I think before the break, we</p> <p>14 were talking about the compliance unit.</p> <p>15 A. Correct.</p> <p>16 Q. What are the names of the</p> <p>17 detectives in the compliant unit?</p> <p>18 A. Detective Prince and Patina.</p> <p>19 Q. How do you spell that?</p> <p>20 A. P-A-T-I-N-A.</p> <p>21 Q. Have they -- how long have they</p> <p>22 been in the compliance unit?</p> <p>23 A. Detective Prince, since before I</p> <p>24 was assigned to narcotics, and so I don't know</p> <p>25 when he began, or maybe shortly after I was</p>	<p style="text-align: right;">Page 61</p> <p>1 A. Maybe 2008, 2009.</p> <p>2 Q. And at what point after that did it</p> <p>3 shrink?</p> <p>4 A. During that period of time, there</p> <p>5 was some layoffs, and officers were reassigned</p> <p>6 back to the districts.</p> <p>7 Q. When was that?</p> <p>8 A. I think 2007 or 2008. You know,</p> <p>9 it's been a while, so I can't give you exact</p> <p>10 time -- exact dates.</p> <p>11 Q. What was the reason for the</p> <p>12 reduction?</p> <p>13 A. The layoffs. The city laid off</p> <p>14 police officers.</p> <p>15 Q. Was that around the time of the</p> <p>16 financial crisis?</p> <p>17 A. I don't remember the exact, but it</p> <p>18 had something to do with the city's finances.</p> <p>19 Q. And did it go down to ten at that</p> <p>20 time or at what level --</p> <p>21 A. It was a slow attrition. So it</p> <p>22 went down -- I don't have -- I don't know the</p> <p>23 exact numbers. So I'm not going to be able to</p> <p>24 give you exact numbers, I'm sorry. But the</p> <p>25 numbers were reduced significantly, as a result</p>

<p style="text-align: right;">Page 62</p> <p>1 of the layoffs. And then over the years, it  2 eventually went to where we are today.  3 Q. Has it ever dipped below ten?  4 A. I don't know that answer. I doubt  5 it.  6 Q. And you think it's about ten today?  7 A. It's probably more than ten,  8 including supervisors.  9 Q. Well, was there ever a time that it  10 was less than overall -- in overall size than  11 what it is today, since you have been there?  12 A. I'm not sure. I'm not sure. I'm  13 trying to remember, but I'm not sure.  14 Q. Are there any plans to increase the  15 size of the narcotics unit?  16 A. I know that Commander Gingell is  17 working on that, so I know we want more people,  18 so...  19 Q. Have you wanted more people for a  20 while?  21 A. Yes, ma'am.  22 Q. Since around 2008, perhaps?  23 A. Since we -- obviously, since we  24 lost them, we wanted them back.  25 Q. Is there any -- are you aware of</p>	<p style="text-align: right;">Page 64</p> <p>1 offenses, and so does compliance. So if you  2 are asking me which personnel does -- handles  3 those investigations, I guess that would be  4 where we are going.  5 Q. Actually, no. I was trying to  6 figure out what areas you had knowledge of.  7 A. Okay. I think you need to -- I'm  8 not sure exactly what you are looking for. So  9 I need clarification on that one.  10 Q. Okay. Well, let's start with the  11 compliance unit. Do you have any personal  12 involvement with them?  13 A. No.  14 Q. Do you have any knowledge about  15 what they do?  16 A. I mean, I have an overall  17 understanding of what they do.  18 Q. Who oversees the compliance unit?  19 A. I would say that Commander Gingell  20 almost is their direct supervisor. Sergeant  21 Baeppler is probably their direct supervisor.  22 Q. Anyone else?  23 A. No.  24 Q. I take it you have knowledge of  25 investigations conducted by the task force you</p>
<p style="text-align: right;">Page 63</p> <p>1 any current plans to grant Commander Ginell's  2 wish for more people?  3 A. Yes.  4 Q. And what do you know about that?  5 A. Just that he expects more personnel  6 assigned to narcotics.  7 Q. And when is that expected to occur?  8 A. I don't know.  9 Q. And are there any specific plans on  10 how those people will be deployed?  11 A. I'm sorry. I don't know that  12 either.  13 Q. Would Commander Gingell be the  14 person I should ask that?  15 A. Yes.  16 Q. Going back to the description we  17 were given of you, you were described as having  18 knowledge of investigations and reporting of  19 opioid-related offenses. Does that sound right  20 to you?  21 A. Yes.  22 Q. What knowledge do you have of  23 investigations of opioid-related offenses?  24 A. Specific opioid-related offenses,  25 the HIDI team investigate opioid-related</p>	<p style="text-align: right;">Page 65</p> <p>1 work with, correct?  2 A. Correct.  3 Q. You are also described as having  4 knowledge of reporting of opioid-related  5 offenses. What do you know about the reporting  6 of opioid-related offenses?  7 A. That the Bureau of Special Services  8 tracks opioid overdoses, fatal and nonfatal,  9 and the HIDI investigation team investigates  10 the causes and looks for the offenders that are  11 involved.  12 Q. What is the Bureau of Special  13 Services?  14 A. That's the bureau that Commander  15 Gingell is in charge of. That's the name of  16 the bureau that he's in charge of.  17 Q. Does that include anything other  18 than narcotics?  19 A. The SWAT unit, narcotics, and the  20 gang squad.  21 Q. Anything else?  22 A. I think that's it, in a nutshell.  23 Q. Is there anybody with a supervisory  24 focus just on narcotics under him?  25 A. Over all narcotics?</p>

<p style="text-align: right;">Page 66</p> <p>1 Q. Yes.</p> <p>2 A. I guess that would be me.</p> <p>3 Q. You're as close as it comes?</p> <p>4 A. Yeah, I'm as close as it comes</p> <p>5 right now.</p> <p>6 Q. Is the gang squad a separate squad</p> <p>7 from narcotics?</p> <p>8 A. Correct.</p> <p>9 Q. Do the two often work together?</p> <p>10 A. Not often, but sometimes.</p> <p>11 Q. Have you had any training specific</p> <p>12 to drugs?</p> <p>13 A. I have.</p> <p>14 Q. And what training is that?</p> <p>15 A. Of course, during the police</p> <p>16 academy, they give you an overall narcotics</p> <p>17 background. I've gone to some schools,</p> <p>18 narcotics investigation schools. I can't give</p> <p>19 the name of those schools off the top of my</p> <p>20 head right now.</p> <p>21 I did go to the DEA drug commanders</p> <p>22 school in Quantico, Virginia. I've gone to</p> <p>23 seminars and workshops as well.</p> <p>24 Q. When you say you've gone to</p> <p>25 schools, are those school courses established</p>	<p style="text-align: right;">Page 68</p> <p>1 Q. Well, do you know if you went to</p> <p>2 any such seminars before you were involved with</p> <p>3 the Northern Ohio Law Enforcement Task Force?</p> <p>4 A. I'm sorry. I don't remember.</p> <p>5 Q. Have you had any experiences in</p> <p>6 your personal life that have affected your</p> <p>7 feelings or beliefs about opioids?</p> <p>8 A. No.</p> <p>9 Q. Have you taken opioids yourself?</p> <p>10 MS. ZIMMERMANN: Counselor, I think</p> <p>11 we are going to object to that, to the extent</p> <p>12 that's asking for his private health</p> <p>13 information and impedes on his right to</p> <p>14 privacy. I'm going to instruct him not to</p> <p>15 answer that.</p> <p>16 Q. Have you had any friends or family</p> <p>17 members who have struggled with addiction?</p> <p>18 MS. ZIMMERMANN: We will lodge the</p> <p>19 same objection, with regard to his right to</p> <p>20 privacy and invading the right of privacy of</p> <p>21 his family members. Counselor, I'm going to</p> <p>22 instruct him not to answer that.</p> <p>23 Q. Well, I'm not asking you for the</p> <p>24 names of any individuals, just asking</p> <p>25 generally, have you ever had any friends or</p>
<p style="text-align: right;">Page 67</p> <p>1 by government agencies for law enforcement</p> <p>2 officers?</p> <p>3 A. Some of them are, and some of them</p> <p>4 are private, instructor-type situations as</p> <p>5 well.</p> <p>6 Q. And how long is the average course</p> <p>7 of such a school?</p> <p>8 A. I would say between three and five</p> <p>9 days.</p> <p>10 Q. Have any of the schools or other</p> <p>11 training courses that you have gone to focused</p> <p>12 on prescription opioids?</p> <p>13 A. I don't know that I have gone to a</p> <p>14 school for prescription opioids. I think I</p> <p>15 have sat in on seminars, like a one-day</p> <p>16 seminar.</p> <p>17 Q. When have you done that most</p> <p>18 recently?</p> <p>19 A. I can't recall, off the top of my</p> <p>20 head.</p> <p>21 Q. Can you recall, in general terms,</p> <p>22 roughly when one or more of those seminars</p> <p>23 were?</p> <p>24 A. I'm sorry. I can't. I don't want</p> <p>25 to give an answer that I'm not sure of.</p>	<p style="text-align: right;">Page 69</p> <p>1 family members who struggled with addiction?</p> <p>2 MS. ZIMMERMANN: I'm going to lodge</p> <p>3 the same objection, counselor.</p> <p>4 MS. WINNER: Okay. Flag that, if</p> <p>5 you would.</p> <p>6 Q. Okay. Are there some kinds of</p> <p>7 opioids that people in the community</p> <p>8 legitimately possess and use?</p> <p>9 A. Yes.</p> <p>10 Q. Are there circumstances under</p> <p>11 which, in your work, you would treat possession</p> <p>12 of Percocet or oxycodone as a crime?</p> <p>13 A. Yes.</p> <p>14 Q. And are there also circumstances</p> <p>15 under which possession of Percocet or oxycodone</p> <p>16 would not be treated as a crime?</p> <p>17 A. Yes.</p> <p>18 Q. Are there some opioids that are</p> <p>19 never lawful to possess?</p> <p>20 A. Yes.</p> <p>21 Q. Can you give me an example of that?</p> <p>22 A. Heroin.</p> <p>23 Q. Where would you classify fentanyl,</p> <p>24 in that respect?</p> <p>25 A. Never lawful to possess.</p>

<p style="text-align: right;">Page 70</p> <p>1 Q. In your law enforcement work, how</p> <p>2 do you distinguish between the lawful</p> <p>3 possession and use of an opioid and an unlawful</p> <p>4 possession and use?</p> <p>5 A. Well, it's easier to distinguish</p> <p>6 with street drugs, a heroin or a street</p> <p>7 fentanyl found on the street, because most</p> <p>8 people don't have a legitimate reason to</p> <p>9 purchase or have it in their possession.</p> <p>10 The pill form, you would have to do</p> <p>11 an investigation into whether the person</p> <p>12 legally obtained that.</p> <p>13 Q. Have you ever been -- personally</p> <p>14 been involved in any investigations about</p> <p>15 whether somebody legitimately obtained a</p> <p>16 prescription opioid?</p> <p>17 A. Yes.</p> <p>18 Q. And when was that most recently?</p> <p>19 A. It's been a long time since I've</p> <p>20 done it, so I couldn't give you a date, but it</p> <p>21 probably would have been back when I was in</p> <p>22 narcotics.</p> <p>23 Q. And back when you were -- you mean</p> <p>24 before you went on the task force?</p> <p>25 A. Before I went to the task force,</p>	<p style="text-align: right;">Page 72</p> <p>1 A. It's kind of a big question for me.</p> <p>2 Could you narrow that down?</p> <p>3 Q. Well, actually, I'm just trying to</p> <p>4 figure out, you know, what kinds of things does</p> <p>5 the police department do that relate to the use</p> <p>6 and abuse of opioids? I guess you do law</p> <p>7 enforcement, you investigate things?</p> <p>8 A. Right.</p> <p>9 Q. What other things does the</p> <p>10 department do?</p> <p>11 A. I know they are involved in the</p> <p>12 pill giveback program, where they have the</p> <p>13 boxes set up, and they come, and people give</p> <p>14 their leftover pills, so they are involved with</p> <p>15 that.</p> <p>16 The city takes part in the Opioid</p> <p>17 Action Committee. There is various, I think,</p> <p>18 public information bulletins that they put out</p> <p>19 regarding, you know, the dangers of opioid</p> <p>20 abuse, and off the top of my head, I think</p> <p>21 that's it.</p> <p>22 Q. Do you have any personal knowledge</p> <p>23 of the pill giveback program?</p> <p>24 A. I don't. I know that our city</p> <p>25 takes part in it, you know, as well as many of</p>
<p style="text-align: right;">Page 71</p> <p>1 correct.</p> <p>2 Q. And how common, during that earlier</p> <p>3 period, was it for you to do an investigation</p> <p>4 of somebody having prescription opioids?</p> <p>5 A. It would be common.</p> <p>6 Q. Was it more common in those days</p> <p>7 for investigations on that subject by the</p> <p>8 narcotics unit than it is today?</p> <p>9 A. I believe so.</p> <p>10 Q. And why is that?</p> <p>11 A. I think the focus of the narcotics</p> <p>12 unit has somewhat shifted towards the street</p> <p>13 drugs, and I think the availability has</p> <p>14 decreased.</p> <p>15 Q. The availability of what?</p> <p>16 A. Of the pill form.</p> <p>17 Q. And when did the availability of</p> <p>18 the pill form decrease, to your knowledge?</p> <p>19 A. I think it's just been within the</p> <p>20 last couple years. I know there has been a big</p> <p>21 push towards decreasing, you know, the amount</p> <p>22 of prescriptions given out.</p> <p>23 Q. What activities does the Cleveland</p> <p>24 Division of Police engage in that relate to the</p> <p>25 use and abuse of opioids?</p>	<p style="text-align: right;">Page 73</p> <p>1 the other law enforcement teams in the county.</p> <p>2 Q. But you are not the person to ask</p> <p>3 about that?</p> <p>4 A. I don't have direct knowledge of</p> <p>5 it.</p> <p>6 Q. And what is the Opioid Action</p> <p>7 Committee?</p> <p>8 A. Commander Gingell sits on that</p> <p>9 committee. It is a group of, you know, members</p> <p>10 of the, like, law enforcement addiction</p> <p>11 services, recovery, prevention, you know, the</p> <p>12 courts, they all get together, and they have</p> <p>13 identified that there is a problem, a horrible</p> <p>14 problem with addiction in our community, and</p> <p>15 they are trying to put together a plan to, you</p> <p>16 know, stop the scourge that has been happening</p> <p>17 in our community.</p> <p>18 Q. Do you do anything relating to that</p> <p>19 committee?</p> <p>20 A. I only sit on it occasionally, and</p> <p>21 that's only when Commander Gingell is not</p> <p>22 available.</p> <p>23 Q. And what have you done when you</p> <p>24 have sat on it?</p> <p>25 A. I take notes, and I provide them to</p>



<p style="text-align: right;">Page 74</p> <p>1 the commander. So I don't have any personal,  2 you know, actions that I take. So I'm just  3 sitting there when he's not there, making sure  4 I provide him with the information about what  5 happened that day.  6 Q. Do you have any involvement in any  7 of the public information or public education  8 efforts?  9 A. I do not.  10 Q. Do Cleveland police officers become  11 involved in assisting with the prosecution of  12 people who are arrested for opioid offenses?  13 A. If we are an investigative  14 part -- if we are part of the investigation  15 process, yes.  16 Q. And do you ever have involvement  17 with that kind of activity?  18 A. No.  19 Q. Are you ever involved in the arrest  20 of people for opioid offenses?  21 A. In the past I have, but not in  22 several years.  23 Q. So what do you do now?  24 A. I basically am an administrator,  25 and I, kind of like, oversee, especially the</p>	<p style="text-align: right;">Page 76</p> <p>1 A. Yes, I do.  2 Q. And what involvement -- is that the  3 HIDI?  4 A. That's correct.  5 Q. And we will come back, I'll ask you  6 more about that later.  7 Obviously you are involved in  8 investigations of deaths by overdose, correct?  9 A. Yes.  10 Q. Do you also investigate overdoses  11 that do not result in death?  12 A. Yes.  13 Q. Has that been something that HIDI  14 has done all along, or has that been something  15 that has changed overtime?  16 A. It has changed. So initially they  17 were just a death investigation squad, but as  18 the problem just kept on getting worse and  19 worse, we expanded it to the nonfatal  20 overdoses.  21 Q. When did that happen?  22 A. I was not assigned there when it  23 first changed. So I'm going to guess sometime  24 before I started. So that was in August,  25 August 2017, so sometime before that.</p>
<p style="text-align: right;">Page 75</p> <p>1 budget end of the task force. I also provide  2 supervision to the detectives while they are  3 working, and try to provide them with the tools  4 that they need to complete their  5 investigations.  6 So I'm not, for the most part, I'm  7 not an active investigator, although  8 occasionally I will assist.  9 Q. Will you give advice to the  10 detectives on their activities?  11 A. Yes.  12 Q. Do you ever oversee any of their  13 activities relating to assisting with  14 prosecution of offenders?  15 A. No.  16 Q. Does the Cleveland Division of  17 Police become involved in emergency response  18 activities relating to opioid addiction or  19 overdoses?  20 A. Could you clarify "emergency  21 response"?  22 Q. Somebody has overdosed.  23 A. Yes, we do.  24 Q. And do you have any involvement in  25 that?</p>	<p style="text-align: right;">Page 77</p> <p>1 Q. Had it gone back and forth?  2 A. No. I believe it started with just  3 the fatals, and then it expanded to the  4 nonfatals and stayed that way.  5 Q. Who is the -- who within the  6 department is principally responsible for  7 public information and education efforts?  8 A. That information comes out of the  9 chief's office.  10 Q. Is there any particular individual  11 you know who is involved in that?  12 A. Detective Ciaccia, and I can't tell  13 you how to spell her name.  14 Q. Anyone else?  15 A. I'm not sure who is currently  16 assigned.  17 Q. Going back to prescription opioids,  18 are there situations in which people may engage  19 in lawful uses of prescription opioids that  20 still cause problems that your department has  21 to get involved in?  22 A. Yes.  23 Q. And how does that happen?  24 A. Somebody could lawfully obtain a  25 prescription for OxyContin, or whatever opioid</p>



<p style="text-align: right;">Page 78</p> <p>1 they may get, and they could abuse that opioid</p> <p>2 themselves, or they could sell that opioid,</p> <p>3 although obtained legally, they could be</p> <p>4 selling it for profit, or they could overdose</p> <p>5 on their own opioid that they legally obtained.</p> <p>6 Q. Has the department ever attempted</p> <p>7 to develop any statistics about what proportion</p> <p>8 of overdoses are attributable to that kind of</p> <p>9 situation?</p> <p>10 A. I don't know that. I don't have</p> <p>11 that answer.</p> <p>12 Q. Is there anybody else who might</p> <p>13 know that?</p> <p>14 A. I don't know. I'm not -- I have no</p> <p>15 knowledge of that part of it, so I'm sorry.</p> <p>16 Q. Is there anybody, other than your</p> <p>17 direct reports, from whom you receive regular</p> <p>18 reports relating to opioids?</p> <p>19 A. Could you rephrase that, please.</p> <p>20 Q. Is there anybody from whom you</p> <p>21 receive regular reports?</p> <p>22 A. Yes.</p> <p>23 Q. And who would that be?</p> <p>24 A. From the commander's office, I get</p> <p>25 an update on the opioid -- the numbers of</p>	<p style="text-align: right;">Page 80</p> <p>1 A. Hugh Shannon.</p> <p>2 Q. And do you receive these reports in</p> <p>3 your capacity as the head of the HIDI unit or</p> <p>4 the other function?</p> <p>5 A. It's because of my involvement with</p> <p>6 the HIDI unit.</p> <p>7 Q. Are there any other regular reports</p> <p>8 that you get?</p> <p>9 A. Those are the only two that I can</p> <p>10 recall.</p> <p>11 Q. Are there any regular reports that</p> <p>12 you make to anyone?</p> <p>13 A. No, ma'am.</p> <p>14 Q. And has that been true since 2011,</p> <p>15 when you joined the task force?</p> <p>16 A. I do not -- yes, that's true, yes.</p> <p>17 Q. So how do you interact with</p> <p>18 Commander Gingell on task force matters?</p> <p>19 A. I meet with him regularly, and</p> <p>20 sometimes he emails me, and I respond to his</p> <p>21 email.</p> <p>22 Q. And how often do you meet with him?</p> <p>23 A. Several times a week.</p> <p>24 Q. And has that been true the entire</p> <p>25 time you have been with the task force?</p>
<p style="text-align: right;">Page 79</p> <p>1 overdoses, not fatal and nonfatal, that we</p> <p>2 respond to.</p> <p>3 Q. Anyone else?</p> <p>4 A. And the Cuyahoga County Coroner's</p> <p>5 Office sends out a report. It might be once or</p> <p>6 twice a week.</p> <p>7 Q. And who do you get the updates from</p> <p>8 the -- start that again.</p> <p>9 From whom do the updates from the</p> <p>10 commander's office come from?</p> <p>11 A. From the commander's secretary.</p> <p>12 Q. And what is the secretary's names?</p> <p>13 A. Jennifer DiGregorio.</p> <p>14 Q. And do you get those via email?</p> <p>15 A. Correct.</p> <p>16 Q. And how often do you get them?</p> <p>17 A. A couple times a week.</p> <p>18 Q. And you said you think from the</p> <p>19 Cuyahoga County Coroner's Office -- or medical</p> <p>20 examiner --</p> <p>21 A. Medical examiner.</p> <p>22 Q. -- you get reports a couple times a</p> <p>23 week?</p> <p>24 A. I may only get that once a week.</p> <p>25 Q. And who sends those reports?</p>	<p style="text-align: right;">Page 81</p> <p>1 A. Less, when I was just the task</p> <p>2 force commander; and much more frequently,</p> <p>3 since I've taken on the additional duties.</p> <p>4 Q. Well, before you took on the</p> <p>5 additional duties, how often did you report to</p> <p>6 him?</p> <p>7 A. At least once a week.</p> <p>8 Q. Does the task force use any police</p> <p>9 department resources, other than yourself and</p> <p>10 the detectives assigned to you?</p> <p>11 MS. ZIMMERMANN: Object to form.</p> <p>12 A. The police, we would use police</p> <p>13 vehicles.</p> <p>14 Q. Anything else?</p> <p>15 A. Our assigned -- our assigned police</p> <p>16 equipment, just our regular duty equipment.</p> <p>17 I'm trying to think, off the top of my head,</p> <p>18 something that, you know, you are referring to</p> <p>19 that we would use.</p> <p>20 Really, you know, off the top of my</p> <p>21 head, that's where I'm going, so, yes, that</p> <p>22 would be it.</p> <p>23 Q. Now, are the salaries of yourself</p> <p>24 and the other detectives assigned to the task</p> <p>25 force paid for with grant funds?</p>

<p style="text-align: right;">Page 82</p> <p>1 A. No, the salary is not paid for with 2 grant funds. The overtime would be paid for 3 with grant funds. 4 Q. What about the vehicles and 5 equipment? 6 A. All the officers came over with -- 7 they are all vehicles assigned by the city. 8 Eventually, each officer was provided a vehicle 9 provided by grant funding. 10 Q. And what about the police 11 equipment, I assume you are talking about 12 things like your gun? 13 A. Yes. Those are all provided by the 14 city. 15 Q. And paid for. Do you know what the 16 city's funding source is for that? 17 A. I do not. 18 Q. Do you know what the city's funding 19 source is for your salary? 20 A. I do not. 21 Q. Do you -- this is a stupid 22 question, but I'm just asking it to start us 23 off. Do you use email in your job? 24 A. Yes. 25 Q. How do you use it?</p>	<p style="text-align: right;">Page 84</p> <p>1 Q. How long have you used email in 2 your work at the police department? 3 A. My city email has been spotty. It 4 has been very difficult for me to get city 5 email, until probably three or four years ago, 6 when I started getting emails on a regular 7 basis. 8 Q. And why was that? 9 A. Glitches in the city's email 10 system. Eventually, they had to change my 11 email for me to get regular email. 12 Q. So for, like in 2009, you simply 13 weren't getting email? 14 A. I may not have. 15 Q. And in 2012, were you getting 16 email? 17 A. It depends on what month in 2012 18 you are asking about. 19 Q. Did you not send email during that 20 time? 21 A. I did not have -- I literally did 22 not have access to the city email. It would 23 not work for me. 24 Q. Did you ever get an explanation 25 about that?</p>
<p style="text-align: right;">Page 83</p> <p>1 A. To convey information between one 2 person to another. 3 Q. Okay. How many emails a day do you 4 think you send? 5 A. It's really hard to give an average 6 day, because my days can be very different, but 7 maybe five. 8 Q. I wish I had your life. 9 How many emails a day do you 10 receive, business emails? 11 A. Right. 25. 12 Q. What proportion of the emails that 13 you send and receive relate, in one way or 14 another, to opioids? 15 A. I would say a small percentage of 16 them. 17 Q. And by "small," do you mean 20 18 percent? 19 A. Probably 20 or under. 20 Q. And what do the rest relate to? 21 A. Administrative -- my administrative 22 duties, which is just personnel issues, budget 23 issues. You know, we have to do personnel 24 evaluations, we have to do sick review. It's 25 just a lot of admin issues at this level.</p>	<p style="text-align: right;">Page 85</p> <p>1 A. I don't remember the exact 2 explanations. I had it, then I didn't have it. 3 So it would fluctuate when it was available, 4 and it would always seem to be, whether it was 5 a tech issue that I, you know, couldn't answer 6 why I didn't, but it's not unusual. 7 Q. When you say, "It's not unusual," 8 you mean other people had that problem too? 9 A. Yes. 10 Q. Well, did people just not 11 communicate by email then? 12 A. Yeah. We were lucky to have 13 everybody in the same office. So when we were 14 at work, you know, we were all together, and 15 then if they needed to call us, they would just 16 call us, and we would take the phone. 17 Q. And that got fixed about three to 18 four years ago? 19 A. I think so, yes. 20 Q. And since that time, you have had 21 regular access to email? 22 A. Yes. 23 Q. Did you use any other -- did you 24 use any other email address, other than your 25 city email address, for your work?</p>

<p style="text-align: right;">Page 86</p> <p>1 A. For work with the city, no.</p> <p>2 Q. Well, do you work for anybody other</p> <p>3 than the city?</p> <p>4 A. Well, for my task force job.</p> <p>5 Q. Okay. But you do that in your</p> <p>6 capacity as an employee of the city, correct?</p> <p>7 A. And as the task force commander.</p> <p>8 Q. And you are employed by the city,</p> <p>9 correct?</p> <p>10 A. I am employed by the city.</p> <p>11 Q. And so you had one or more</p> <p>12 additional email addresses for the task force;</p> <p>13 is that correct?</p> <p>14 A. One.</p> <p>15 Q. And what was that email address?</p> <p>16 A. Mike.Connelly@OhioHIDTA.org.</p> <p>17 Q. And so before about three to four</p> <p>18 years ago, was that the only email address,</p> <p>19 basically, that you had that was operative?</p> <p>20 A. I believe so.</p> <p>21 Q. And did you use that email address</p> <p>22 during that time for non-task force business</p> <p>23 purposes?</p> <p>24 A. I did.</p> <p>25 Q. And did you then continue after</p>	<p style="text-align: right;">Page 88</p> <p>1 A. Yes.</p> <p>2 Q. Did you use your police department</p> <p>3 email address for anything related to opioids</p> <p>4 before 2017?</p> <p>5 A. Probably in 2016.</p> <p>6 Q. If you wanted to find an email that</p> <p>7 you sent five years ago, would you be able to</p> <p>8 do it?</p> <p>9 A. Every single email I sent, I guess,</p> <p>10 would be on the city's server, if I needed to</p> <p>11 access the city's server.</p> <p>12 Q. What about an email you sent five</p> <p>13 years ago using the other email address?</p> <p>14 A. I am not aware of the retention</p> <p>15 policy for HIDTA.</p> <p>16 Q. Have you ever had occasion to go</p> <p>17 back and dig out an old email you sent or</p> <p>18 received?</p> <p>19 A. I don't recall having to do that.</p> <p>20 Q. Have you ever kept a diary or a</p> <p>21 notebook with notes of your police activities?</p> <p>22 A. Not a diary. I have taken notes,</p> <p>23 and I usually would transfer those notes onto a</p> <p>24 document.</p> <p>25 Q. And where would that document be?</p>
<p style="text-align: right;">Page 87</p> <p>1 that to use it for non-task force business?</p> <p>2 A. Yes.</p> <p>3 Q. Do you still use it that way today?</p> <p>4 A. Yes.</p> <p>5 Q. How do you decide -- or do you make</p> <p>6 a conscious decision which email address to</p> <p>7 use?</p> <p>8 A. My primary email address is my task</p> <p>9 force email address, because that's where my</p> <p>10 primary focus is, on the task force. I spend</p> <p>11 most of my time there. And most of my emails</p> <p>12 are related to the task force.</p> <p>13 Q. But do you make a conscious</p> <p>14 decision, every time you send an email, this is</p> <p>15 one that I should use this address for, this is</p> <p>16 one I should use the other address for, or is</p> <p>17 it more just hit or miss?</p> <p>18 A. I don't make a conscious decision</p> <p>19 on which email address to use.</p> <p>20 Q. Do people who interact with you</p> <p>21 consistently use -- well, strike that.</p> <p>22 Do people within the division of</p> <p>23 police who communicate with you on non-task</p> <p>24 force business use your task force email</p> <p>25 address, at times?</p>	<p style="text-align: right;">Page 89</p> <p>1 A. The city retains all my documents.</p> <p>2 Q. So do you have a computer that you</p> <p>3 work with?</p> <p>4 A. Yes.</p> <p>5 Q. And do you store documents on that</p> <p>6 computer?</p> <p>7 A. Some.</p> <p>8 Q. And then do you also store</p> <p>9 documents on some central city drive of some</p> <p>10 kind?</p> <p>11 A. I do not use a central city drive</p> <p>12 for my documents. Most of my documents would</p> <p>13 be on my computer or archived.</p> <p>14 Q. And where would they be archived?</p> <p>15 A. Either with -- either in the</p> <p>16 commander's office or somewhere -- wherever the</p> <p>17 city keeps their archives.</p> <p>18 Q. If you needed to pull up a report</p> <p>19 or something else that you -- well, not a</p> <p>20 report, but a document, a set of notes that you</p> <p>21 wrote up two months ago, how would you go about</p> <p>22 getting it?</p> <p>23 A. I could request the -- my day's</p> <p>24 records from the commander's office, if I</p> <p>25 needed to.</p>

<p style="text-align: right;">Page 90</p> <p>1 Q. So you say that you sometimes will 2 write up -- you just type up notes that you 3 took, is that what you do? 4 A. Right. I'll type it out. 5 Q. Okay. And then you save it into a 6 document -- 7 A. Right. 8 Q. -- on your computer? 9 Is there -- are there any other 10 documents that you create in the course of your 11 work? 12 A. Not on a normal occasion, no. I 13 don't have to create a lot of reports, in my 14 capacity, updated reports for the budgets and 15 stuff like that, but my daily activity, that's 16 it. 17 Q. What about the budget reports, 18 where are they kept? 19 A. They go to public safety. 20 Q. Do you write anything relating to 21 budget issues? 22 A. It's not a written-out report. 23 It's just a spreadsheet with expenditures. 24 Q. And is that something you keep on 25 your computer?</p>	<p style="text-align: right;">Page 92</p> <p>1 Q. Of the 50 percent -- well, strike 2 that. 3 Of the 20 to 25 percent in 2011, 4 how much of that was related to prescription 5 opioids? 6 A. I can't give an exact percentage, 7 but very little. 8 Q. How about the 50 percent today, how 9 much of that is prescription opioids? 10 A. Very little. 11 Q. In between 2011 and today, was 12 there any time when it was not very little? 13 A. It's always been very little. 14 Q. And what did the -- and what did 15 that very little consist of? 16 MS. ZIMMERMANN: Object to form. 17 A. I don't have -- I can't give you an 18 exact answer, because it's been so long, but we 19 did do some smaller pill cases, but I believe, 20 and this -- I'm trying to give you an answer, 21 but I can't remember, so I don't want -- I 22 can't give you a specific answer. 23 I do believe that we did some pill 24 cases, but on a low, very low level, and that's 25 all I can answer. I'm sorry.</p>
<p style="text-align: right;">Page 91</p> <p>1 A. It is. 2 Q. And do these include expenditures 3 relating to the activities for which you were 4 responsible for overseeing? 5 A. For the task force. 6 Q. And the task force -- at least some 7 of the task force activities, I take it, relate 8 to opioids; is that correct? 9 A. Some. 10 Q. What percentage of the task force 11 activities relate to opioids, would you say? 12 A. Maybe 50 percent. 13 Q. Has that changed over time? 14 A. Yes. 15 Q. And how has it changed? 16 A. It has increased. Our opioid 17 investigations probably have increased since 18 2011. 19 Q. At what level was it around 2011? 20 A. "At what level"; is that the 21 question? 22 Q. Yes. You said about 50 percent 23 now. What was it then? 24 A. It's hard to give an exact number, 25 but maybe 20 to 25 percent.</p>	<p style="text-align: right;">Page 93</p> <p>1 Q. But that was several years ago? 2 A. Yes. 3 Q. Do you have any paper in your 4 office? 5 A. Yes. 6 Q. Some people would say no these 7 days, but some of us still say yes. 8 A. Uh-huh. 9 Q. How much paper is in your office? 10 A. Paper documents? 11 Q. Yes. 12 A. It's hard to give an answer of how 13 much paper is in my office. I mean, are you 14 asking me about how many pieces of paper are in 15 my -- 16 Q. I mean, do you have, you know, 17 large piles of things in your office or -- 18 A. I do not. I do not have large 19 piles of things. 20 Q. What kinds of paper do you have in 21 your office, paper with writing on it? 22 A. It's personnel documents, overtime 23 documents, budget documents -- what else -- 24 overtime reimbursement documents, that kind of 25 paper documents.</p>

<p style="text-align: right;">Page 94</p> <p>1 Q. Have you ever received any</p> <p>2 instructions about the need to preserve emails</p> <p>3 and other documents that relate to email?</p> <p>4 MS. ZIMMERMANN: You may answer</p> <p>5 that to the extent that it doesn't involve</p> <p>6 communications with counsel.</p> <p>7 A. Yes, I have.</p> <p>8 Q. And when did you receive those</p> <p>9 instructions?</p> <p>10 A. Several months ago.</p> <p>11 MS. WINNER: Give me number 10.</p> <p>12 Q. I would like to mark as Connelly</p> <p>13 Exhibit 1 a one-page chart, entitled City of</p> <p>14 Cleveland, Department of public Safety,</p> <p>15 Division of Police Organizational Structure.</p> <p>16 - - - - -</p> <p>17 (Thereupon, Deposition Exhibit 1, A</p> <p>18 One-Page Chart, Entitled City of</p> <p>19 Cleveland, Department of Public</p> <p>20 Safety, Division of Police</p> <p>21 Organizational Structure, was marked</p> <p>22 for purposes of identification.)</p> <p>23 - - - - -</p> <p>24 Q. You go by Lieutenant Connelly, is</p> <p>25 that how you are normally referred to?</p>	<p style="text-align: right;">Page 96</p> <p>1 Q. And how long was Tomba in the</p> <p>2 position?</p> <p>3 A. Several years. I don't remember</p> <p>4 exactly how many.</p> <p>5 Q. And is that who Commander Gingell</p> <p>6 reports to?</p> <p>7 A. Correct.</p> <p>8 Q. And is the Bureau of Special</p> <p>9 Services under Homeland Special Operations, is</p> <p>10 that the bureau that Commander Gingell</p> <p>11 commands?</p> <p>12 A. Correct.</p> <p>13 Q. And under that, it's very small</p> <p>14 type, it's got Narcotics, which we have talked</p> <p>15 about, it's got SWAT. NOLETF, is that your</p> <p>16 task force?</p> <p>17 A. Correct.</p> <p>18 Q. STANCE, what is that?</p> <p>19 A. That is one of the commander's, I</p> <p>20 think, committees that he sits, STANCE.</p> <p>21 Q. What does that committee do?</p> <p>22 A. You know, I'm not completely aware</p> <p>23 of that.</p> <p>24 Q. Do you know what STANCE stands for?</p> <p>25 A. I don't.</p>
<p style="text-align: right;">Page 95</p> <p>1 A. Yes.</p> <p>2 Q. Okay. Lieutenant Connelly, have</p> <p>3 you ever seen Exhibit 1 before?</p> <p>4 A. Yes.</p> <p>5 Q. And what is it?</p> <p>6 A. It's the organizational structure</p> <p>7 for the division of police.</p> <p>8 Q. And under something called Homeland</p> <p>9 Special Operations, there is several boxes; do</p> <p>10 you see that?</p> <p>11 A. Yes.</p> <p>12 Q. What is Homeland Special</p> <p>13 Operations?</p> <p>14 A. That is a deputy chief section. So</p> <p>15 Field Operations, Administrative Operation,</p> <p>16 Homeland Special Operations are run by deputy</p> <p>17 chief.</p> <p>18 Q. And who is the deputy chief who has</p> <p>19 that responsibility now?</p> <p>20 A. Harold Pretel.</p> <p>21 Q. And how long has that been the</p> <p>22 case?</p> <p>23 A. Approximately one year.</p> <p>24 Q. And who was his predecessor?</p> <p>25 A. Edward Tomba.</p>	<p style="text-align: right;">Page 97</p> <p>1 Q. Have you ever been to any STANCE</p> <p>2 meetings?</p> <p>3 A. I don't believe I have.</p> <p>4 Q. Gang Impact then is listed next.</p> <p>5 Is that the gang unit you referred to?</p> <p>6 A. Correct.</p> <p>7 Q. And then there is NOVFTF. Do you</p> <p>8 know what that is?</p> <p>9 A. Northern Ohio Violent Fugitive Task</p> <p>10 Force.</p> <p>11 Q. And what does that?</p> <p>12 A. That's the marshal's task force.</p> <p>13 They pick up fugitives.</p> <p>14 Q. Then HIDTA?</p> <p>15 A. HIDTA, High Intensive Drug</p> <p>16 Trafficking Area.</p> <p>17 Q. And does that include activities</p> <p>18 other than your task force?</p> <p>19 A. Yes.</p> <p>20 Q. Are you involved in those</p> <p>21 activities?</p> <p>22 A. On occasion.</p> <p>23 Q. And which other activities have you</p> <p>24 been involved in, relating to HIDTA?</p> <p>25 A. The HIDTA group is the hotel</p>



<p style="text-align: right;">Page 98</p> <p>1 interdiction group, just listed as HIDTA on 2 here. So they investigate the hotel targets. 3 So I do, on occasion, assist with 4 them, but I am the overall supervisor, so there 5 is a sergeant involved and then I supervise the 6 sergeant. 7 Q. Anything else? 8 A. That would be it. 9 Q. And then there is the DV Warrant 10 Unit. What is that, domestic violence? 11 A. Correct. 12 Q. And that's also under Commander 13 Gingell? 14 A. Yes. 15 Q. And then VCTF; do you see that? 16 A. Violent Crimes Task Force. 17 Q. And what does that do? 18 A. That is a task force that has to do 19 with -- I think it is the FBI Violent Crimes 20 Task Force. 21 Q. And does that relate to narcotics 22 in any way? 23 A. I don't think it relates to 24 narcotics specifically, but Commander Gingell 25 is in charge of the task force officer that it</p>	<p style="text-align: right;">Page 100</p> <p>1 Q. And then over on the left side of 2 this exhibit, there is Field Operations. Is 3 that where the districts are located? 4 A. That's correct. 5 Q. And so some activities relating to 6 opioids would fall under Field Operations? 7 A. I believe so. 8 Q. And what would those be? 9 A. The vice units, specifically, would 10 be investigating some opioid abuse 11 investigations, and I would imagine that some 12 of the uniform patrol officers would make 13 street arrests. 14 Q. What does the vice unit do, 15 relating to opioids? 16 A. They would do street level drug 17 investigations. 18 Q. And how many -- do you know how 19 many officers are involved in that? 20 A. I don't. 21 Q. Are there officers in the vice unit 22 who are dedicated to that activity? 23 A. I'm not aware of that information. 24 Q. Who would know the answer to that 25 question?</p>
<p style="text-align: right;">Page 99</p> <p>1 is assigned to. 2 Q. So that's one officer? 3 A. I believe it is just one officer. 4 Q. Then next to Bureau of Special 5 Services, there is Bureau of Special 6 Investigations. What does that bureau do? 7 A. They investigate homicides, they 8 investigate sexual assaults, they are in charge 9 of the crime scene and record unit, also 10 accident investigation, the forensic unit. 11 Q. Who leads that bureau? 12 A. That bureau is currently being led 13 by a lieutenant, Lieutenant Ross. The bureau 14 does not have a commander assigned. There is a 15 vacancy there. 16 Q. Then there is a Bureau of Homeland 17 Services? 18 A. Yes, that's correct. 19 Q. And what does that bureau do? 20 A. Like the bomb squad, K9, the 21 airport, airport security, they also have an 22 intelligence section. So there is an 23 intelligence group that's assigned to them. I 24 don't deal with them very often, but I do help, 25 every once in a while.</p>	<p style="text-align: right;">Page 101</p> <p>1 A. I think each district commander 2 focuses his vice unit on -- you know, so they 3 get direction from their district commander. 4 Q. Do the vice units do other things, 5 as well? 6 A. Yes. 7 Q. And what other things do they do? 8 A. They would do the liquor control, 9 they would do prostitution, they would 10 sometimes help if there was a rash of crimes or 11 robberies, they would sometimes help with those 12 investigations, as well. 13 Q. Does your department divide or 14 share responsibilities with other local law 15 enforcement agencies, relating to opioids? 16 A. In what respect? I don't 17 understand. 18 Q. In any respect. 19 A. Do we divide? 20 Q. Do you share responsibilities, do 21 you cooperate with our local law enforcement? 22 A. The division as a whole, I'm sure 23 that they would share -- they don't share 24 responsibility, but they would share 25 information somehow.</p>



<p style="text-align: right;">Page 102</p> <p>1 Q. Are there any formal task forces or</p> <p>2 anything like that put in place?</p> <p>3 A. My task force would be a formal</p> <p>4 task force, the HIDI task force would be a</p> <p>5 formal task force. Beyond that, there is, you</p> <p>6 know -- law-enforcement wide, is that the</p> <p>7 question?</p> <p>8 Q. Yes.</p> <p>9 A. So a lot of the task forces that</p> <p>10 you see under a commander would be joint task</p> <p>11 forces.</p> <p>12 Q. Are there people from the Cuyahoga</p> <p>13 County Sheriff's Office that you work with on a</p> <p>14 regular basis, that your unit works with on a</p> <p>15 regular basis on investigations?</p> <p>16 A. Yes.</p> <p>17 Q. And who predominantly do you work</p> <p>18 with there?</p> <p>19 A. We have a detective assigned to my</p> <p>20 task force and a detective assigned to the</p> <p>21 hotel interdiction task force.</p> <p>22 Q. Who is the detective assigned to</p> <p>23 your task force?</p> <p>24 A. Marc Bottone.</p> <p>25 Q. And that's from Cuyahoga County?</p>	<p style="text-align: right;">Page 104</p> <p>1 nature of the particular investigation?</p> <p>2 A. Correct.</p> <p>3 Q. Is there anybody you work with</p> <p>4 specifically from Akron or Summit relating to</p> <p>5 HIDI investigations?</p> <p>6 A. No.</p> <p>7 Q. Do you ever work with people from</p> <p>8 Summit or Akron on HIDI investigations?</p> <p>9 A. HIDI, I'm not aware.</p> <p>10 Q. Are there any other -- well, strike</p> <p>11 that.</p> <p>12 Your task force includes</p> <p>13 participants from jurisdictions other than</p> <p>14 Cleveland and Cuyahoga County, correct?</p> <p>15 A. Yes.</p> <p>16 Q. And are there people assigned to</p> <p>17 the task force from those jurisdictions?</p> <p>18 A. Yes.</p> <p>19 Q. How many people total, detectives</p> <p>20 total are assigned to the task force?</p> <p>21 A. Detectives or agents? I mean, are</p> <p>22 we talking about local people or --</p> <p>23 Q. Well, let's start with the local</p> <p>24 people, the nonfederal people.</p> <p>25 A. Maybe ten.</p>
<p style="text-align: right;">Page 103</p> <p>1 A. Correct.</p> <p>2 Q. Do you have anyone from Summit</p> <p>3 County assigned to your task force?</p> <p>4 A. No.</p> <p>5 Q. Is there anybody from Summit County</p> <p>6 Sheriff's Office that you work with on a</p> <p>7 regular basis, for your task force?</p> <p>8 A. No, ma'am.</p> <p>9 Q. How about the City of Akron?</p> <p>10 A. No.</p> <p>11 Q. Do Akron and Summit participate in</p> <p>12 your task force at all?</p> <p>13 A. No.</p> <p>14 Q. And why is that?</p> <p>15 A. They have their own task forces, so</p> <p>16 they pool their own resources from their</p> <p>17 region.</p> <p>18 Q. For the HIDI investigations that</p> <p>19 you do, do you ever work with people from</p> <p>20 Cuyahoga County Sheriff's Office?</p> <p>21 A. Yes.</p> <p>22 Q. Is there anybody that you work with</p> <p>23 on a regular basis from there?</p> <p>24 A. No.</p> <p>25 Q. So it would just depend on the</p>	<p style="text-align: right;">Page 105</p> <p>1 Q. And about three of those are yours;</p> <p>2 is that correct?</p> <p>3 A. Right.</p> <p>4 Q. And then how many federal agents</p> <p>5 are there?</p> <p>6 A. Maybe seven, approximately. These</p> <p>7 are approximate numbers.</p> <p>8 Q. Do any of them report to you?</p> <p>9 A. Of the federal agents?</p> <p>10 Q. Yes.</p> <p>11 A. They would report to me as -- in my</p> <p>12 capacity as the commander of the task force.</p> <p>13 Q. Is there a memorandum of</p> <p>14 understanding relating to the task force?</p> <p>15 A. Yes.</p> <p>16 Q. Do you have a copy of it?</p> <p>17 A. No, ma'am.</p> <p>18 Q. Do you know who does have a copy of</p> <p>19 it?</p> <p>20 A. I'm sure it would be in the chief's</p> <p>21 office.</p> <p>22 Q. Is there a -- strike that.</p> <p>23 Does the narcotics unit have any</p> <p>24 manuals relating to investigations concerning</p> <p>25 opioids?</p>

<p style="text-align: right;">Page 106</p> <p>1 A. I don't believe so.</p> <p>2 Q. Are there any other written</p> <p>3 instructions that are given to members of the</p> <p>4 unit concerning their work?</p> <p>5 A. On opioids, no.</p> <p>6 Q. How about are there any manuals,</p> <p>7 period?</p> <p>8 A. Yes.</p> <p>9 Q. And what manuals exist?</p> <p>10 A. There is a general narcotics unit</p> <p>11 policy and procedures manual.</p> <p>12 Q. And does that policy and procedures</p> <p>13 manual include any material that relates to</p> <p>14 opioids?</p> <p>15 A. I don't know if it specifically</p> <p>16 relates to opioids or just narcotics</p> <p>17 investigations in the general, broader sense.</p> <p>18 Q. And what kinds of information is</p> <p>19 included in the manual?</p> <p>20 A. It talks about charging people, it</p> <p>21 talks about conducting investigations, it has</p> <p>22 documents regarding prepping a grand jury</p> <p>23 package, it has information about a controlled</p> <p>24 purchases and surveillance, it has information</p> <p>25 about confidential source usage, that type of</p>	<p style="text-align: right;">Page 108</p> <p>1 questions about the Northern Ohio Law</p> <p>2 Enforcement Task Force, and just so I don't</p> <p>3 have to have that mouthful every time, I'm</p> <p>4 going to continue to refer to it as your task</p> <p>5 force --</p> <p>6 A. Okay.</p> <p>7 Q. -- okay?</p> <p>8 A. Sure.</p> <p>9 Q. But if you ever think it's not</p> <p>10 clear what I'm talking about, please speak up.</p> <p>11 Over the past ten years or the</p> <p>12 past -- since 2011, we have talked about how</p> <p>13 there has been a change in the mix of</p> <p>14 activities of the task force.</p> <p>15 Who decides what the task force is</p> <p>16 going to do?</p> <p>17 A. Are you asking me in terms of what</p> <p>18 crimes we investigate?</p> <p>19 Q. Or what activities you are going to</p> <p>20 undertake.</p> <p>21 A. It would be myself and Special</p> <p>22 Agent Dekatch, who is the other task force</p> <p>23 commander. We would kind of give focus, but we</p> <p>24 have a Heads of Agency.</p> <p>25 Q. You have a what?</p>
<p style="text-align: right;">Page 107</p> <p>1 thing.</p> <p>2 Q. Are there any bulletins or updates</p> <p>3 or other kinds of things circulated to people</p> <p>4 in the unit about procedures?</p> <p>5 A. I would -- I would say yes, there</p> <p>6 is, coming from the commander's office.</p> <p>7 Q. Do any of those relate to opioids?</p> <p>8 A. Yes.</p> <p>9 Q. Does the task force have a manual</p> <p>10 or anything similar to a manual?</p> <p>11 A. Yes. It is very similar to what I</p> <p>12 just explained to you.</p> <p>13 Q. And who put together that manual?</p> <p>14 A. It was my predecessor.</p> <p>15 Q. Have you ever done any work to</p> <p>16 update or revise it?</p> <p>17 A. We're working on a revision now.</p> <p>18 MS. WINNER: This might be a good</p> <p>19 time to take a short break.</p> <p>20 THE VIDEOGRAPHER: Off the record,</p> <p>21 11:16.</p> <p>22 (Recess taken.)</p> <p>23 THE VIDEOGRAPHER: On the record,</p> <p>24 11:34.</p> <p>25 Q. I'd like to ask you now some</p>	<p style="text-align: right;">Page 109</p> <p>1 A. A Heads of Agency. It would be all</p> <p>2 the chiefs of police, task force, I'm sorry,</p> <p>3 like the special agent supervisor, all that</p> <p>4 kind of thing, they kind of meet on a quarterly</p> <p>5 basis, we discuss cases, we discuss emerging</p> <p>6 trends type of thing.</p> <p>7 Q. And who participates in that for</p> <p>8 Cleveland?</p> <p>9 A. Commander Gingell.</p> <p>10 Q. Do you also participate in those</p> <p>11 meetings?</p> <p>12 A. I sit in the meeting as the</p> <p>13 commander of the task force, but Commander</p> <p>14 Gingell sits on the meeting and heads -- so</p> <p>15 he's sitting in for the chief.</p> <p>16 Q. And is there a name for these</p> <p>17 meetings?</p> <p>18 A. It is a Heads of Agency meeting.</p> <p>19 Q. And are minutes taken of these</p> <p>20 meetings?</p> <p>21 A. Yes.</p> <p>22 Q. Do you receive copies of the</p> <p>23 minutes?</p> <p>24 A. Yes.</p> <p>25 Q. Do you still have copies of the</p>

<p style="text-align: right;">Page 110</p> <p>1 minutes from these meetings?</p> <p>2 A. Yes.</p> <p>3 Q. Where do you have them?</p> <p>4 A. In my office.</p> <p>5 Q. Printed out?</p> <p>6 A. Yes.</p> <p>7 Q. Does Commander Gingell also receive</p> <p>8 copies of the minutes?</p> <p>9 A. I don't know.</p> <p>10 Q. So you say they meet quarterly; is</p> <p>11 that correct?</p> <p>12 A. Yeah, normally it would be</p> <p>13 quarterly. I wouldn't say it would be exactly</p> <p>14 quarterly every year, but they try to meet</p> <p>15 quarterly.</p> <p>16 Q. And where do these meetings take</p> <p>17 place?</p> <p>18 A. In a conference room in the U.S.</p> <p>19 Attorney's Office.</p> <p>20 Q. And what is discussed at these</p> <p>21 meetings?</p> <p>22 A. Ongoing investigations, our current</p> <p>23 level of finance. They question, you know, do</p> <p>24 we have enough money to continue to run the</p> <p>25 task force, the direction the task forces are</p>	<p style="text-align: right;">Page 112</p> <p>1 do that?</p> <p>2 A. It would be controlled purchases of</p> <p>3 narcotics.</p> <p>4 Q. And who provides the funding for</p> <p>5 that?</p> <p>6 A. Some of the funding comes through</p> <p>7 the grant, some of the funding comes through</p> <p>8 the FBI, some of the funding could come through</p> <p>9 the city, if it was a joint operation with the</p> <p>10 city.</p> <p>11 Q. How often have you gotten funds</p> <p>12 from the city for that?</p> <p>13 A. We get funds from the city -- how</p> <p>14 often, percentage-wise; is that the question?</p> <p>15 Q. Let's put it that way. Let's do it</p> <p>16 that way.</p> <p>17 A. Maybe 10 percent of the time or</p> <p>18 less.</p> <p>19 Q. Has that changed over time?</p> <p>20 A. It all depends on the</p> <p>21 investigation. Some investigations are more</p> <p>22 costly than others.</p> <p>23 Q. Have the -- all right. So you get</p> <p>24 focus, when you say "focus," you mean like</p> <p>25 priorities, the kinds of things they want you</p>
<p style="text-align: right;">Page 111</p> <p>1 going, and any emerging trends that we are</p> <p>2 seeing.</p> <p>3 Q. And are any decisions made at those</p> <p>4 meetings?</p> <p>5 A. Sometimes decisions are made, but I</p> <p>6 think it's just a focus, what we are focusing</p> <p>7 on.</p> <p>8 Q. When you say, "The current level of</p> <p>9 finance," how does the level of finance</p> <p>10 constrain your operations?</p> <p>11 MS. ZIMMERMANN: Object to form.</p> <p>12 You may answer.</p> <p>13 A. How much -- it would limit the</p> <p>14 amount of overtime that is available to be paid</p> <p>15 out. It could limit purchases of equipment,</p> <p>16 surveillance equipment, vehicles, any equipment</p> <p>17 that we would need to run the task force.</p> <p>18 It could limit, you know, our</p> <p>19 ability to investigate individual cases,</p> <p>20 depending on how costly that investigation</p> <p>21 would be. That's the direction we are going.</p> <p>22 Q. Does your task force ever use buy</p> <p>23 money?</p> <p>24 A. Yes.</p> <p>25 Q. In what kinds of operations do you</p>	<p style="text-align: right;">Page 113</p> <p>1 to be doing; is that what comes out of these</p> <p>2 meetings?</p> <p>3 A. Yes, and we discuss what's</p> <p>4 happening in some of their cities, when they</p> <p>5 are there and they bring those things up, and</p> <p>6 then we inform them on what our current</p> <p>7 investigations, the status of our current</p> <p>8 investigations.</p> <p>9 Q. So how is it then decided what</p> <p>10 investigations you are going to pursue?</p> <p>11 A. Well, it's decided based on the</p> <p>12 information that we have. You may want to</p> <p>13 start an investigation, but if you don't have a</p> <p>14 lead, then you are kind of stuck. So the</p> <p>15 informations are run based on -- based on our</p> <p>16 intelligence.</p> <p>17 So when we get intelligence that</p> <p>18 can put us in the right place, then we head in</p> <p>19 that direction.</p> <p>20 Q. Where does the intelligence come</p> <p>21 from?</p> <p>22 A. From sources of information that</p> <p>23 the investigators develop.</p> <p>24 Q. So these would be confidential</p> <p>25 sources, typically?</p>

<p style="text-align: right;">Page 114</p> <p>1 A. Yes.</p> <p>2 Q. Don't worry. I'm not going to ask</p> <p>3 you what they are.</p> <p>4 MS. ZIMMERMANN: Thank you.</p> <p>5 MS. WINNER: You're welcome.</p> <p>6 Q. So are most of the sources the</p> <p>7 sources developed by detectives who are on the</p> <p>8 task force?</p> <p>9 A. Most of the time.</p> <p>10 Q. Do you ever get leads from outside</p> <p>11 the task force?</p> <p>12 A. Yes.</p> <p>13 Q. And what kinds of leads are those?</p> <p>14 A. The detectives have developed</p> <p>15 relationships with other detectives from other</p> <p>16 agencies or from within their own agencies,</p> <p>17 many of them come from within their own</p> <p>18 agencies, and they decide that this would be a</p> <p>19 good case for the task force to follow up on,</p> <p>20 so they would pass that information on.</p> <p>21 The FBI obviously comes with their</p> <p>22 own set of informants and their own leads, so</p> <p>23 we could follow up on that.</p> <p>24 So our -- the direction we go, you</p> <p>25 know, we try to work the best leads, that we</p>	<p style="text-align: right;">Page 116</p> <p>1 Q. Do you ever get pushback from the</p> <p>2 FBI on any of those?</p> <p>3 A. No.</p> <p>4 Q. Is there anybody other than</p> <p>5 Commander Gingell who gives you directives</p> <p>6 about things you should be doing?</p> <p>7 A. No.</p> <p>8 Q. When was the last time Commander</p> <p>9 Gingell gave you such a directive?</p> <p>10 A. Over a year ago, maybe two years</p> <p>11 ago, when the opioid crisis was really hitting</p> <p>12 us hard.</p> <p>13 Q. And this was the crisis when</p> <p>14 fentanyl started showing up on the street?</p> <p>15 A. When fentanyl started showing up</p> <p>16 and when people just started dying in crazy</p> <p>17 numbers.</p> <p>18 Q. And were these deaths generally the</p> <p>19 result of the fentanyl?</p> <p>20 A. I believe, for the most part, they</p> <p>21 were a fentanyl-heroin combination, initially.</p> <p>22 Q. And did the task force then pick up</p> <p>23 on that and start investigating that?</p> <p>24 A. We made sure we focused on heroin</p> <p>25 investigations, and when I say "heroin," it is</p>
<p style="text-align: right;">Page 115</p> <p>1 think we can have the most success from.</p> <p>2 Q. Who makes the decision whether to</p> <p>3 follow up on a lead and initiate an</p> <p>4 investigation?</p> <p>5 A. The detectives would bring it to</p> <p>6 myself and Special Agent Dekatch.</p> <p>7 Q. And then the two of you would</p> <p>8 decide?</p> <p>9 A. Yes.</p> <p>10 Q. Do you ever consult with Commander</p> <p>11 Gingell or others about whether a particular</p> <p>12 investigation is worth pursuing?</p> <p>13 A. No, not on a regular basis. I</p> <p>14 would inform him on our investigations, but it</p> <p>15 is pretty much our decision, unless I'm giving</p> <p>16 a directive, saying, "Hey, we need you to do</p> <p>17 this."</p> <p>18 Q. And does that happen?</p> <p>19 A. It has, yes.</p> <p>20 Q. So sometimes Commander Gingell</p> <p>21 would say to you, "Here is something we really</p> <p>22 need you to follow up on"?</p> <p>23 A. That could be -- he could say that,</p> <p>24 or he could say, "Hey, I need you to head in</p> <p>25 this direction."</p>	<p style="text-align: right;">Page 117</p> <p>1 almost synonymous with fentanyl.</p> <p>2 Q. Did you also see fentanyl mixed</p> <p>3 with cocaine?</p> <p>4 A. We didn't see that initially, but</p> <p>5 we see that now.</p> <p>6 Q. And is that also one of your</p> <p>7 priorities?</p> <p>8 A. Could you clarify what you mean</p> <p>9 by --</p> <p>10 Q. Was it also an area, a focus area</p> <p>11 for the task force?</p> <p>12 A. Fentanyl and cocaine?</p> <p>13 Q. Yes.</p> <p>14 A. Cocaine was always one of our</p> <p>15 focuses, so it was easy to continue to focus on</p> <p>16 cocaine.</p> <p>17 Q. So can you describe for me, in</p> <p>18 general terms, I don't need details, but just</p> <p>19 general terms, what kinds of investigations</p> <p>20 your task force has undertaken relating to</p> <p>21 opioids?</p> <p>22 A. Our primary opioid investigation</p> <p>23 would be a heroin supplier or, slash, fentanyl</p> <p>24 suppliers, because now it is almost -- you</p> <p>25 don't know if you are going to buy heroin or</p>

<p style="text-align: right;">Page 118</p> <p>1 fentanyl. Somebody may tell you you are buying  2 heroin, but you are actually getting fentanyl.  3 Q. And sometimes somebody may tell you  4 you are buying cocaine and you are getting a  5 mixture of fentanyl; is that correct?  6 A. It has happened, but not in the  7 frequency we are seeing it on the other side.  8 Q. Do people -- when people get drugs  9 that are laced with fentanyl, do they -- do  10 they know that they are getting the fentanyl,  11 typically?  12 MS. ZIMMERMANN: Object to form.  13 You may answer.  14 A. I think some do and some don't.  15 Q. So if somebody, for example, gets a  16 cocaine-fentanyl mix, they may think they are  17 just getting cocaine?  18 A. That absolutely, I believe, is  19 true.  20 Q. Is cocaine an opioid?  21 A. It is not.  22 Q. Do fentanyl or other opioids ever  23 get mixed with meth or other drugs?  24 A. Yes.  25 Q. And has that also been part of the</p>	<p style="text-align: right;">Page 120</p> <p>1 A. What do you mean "in the mix"?  2 Q. Which drugs you are focusing on,  3 what kinds of activities --  4 A. We are absolutely trying to focus  5 more on the opioid drugs, heroin and fentanyl  6 now.  7 Q. Do you investigate both importation  8 and sale, or do you focus more on one than the  9 other?  10 A. I guess our focus is more on the  11 sale within our area.  12 Q. We talked earlier about package  13 interdiction.  14 A. Yes.  15 Q. Is that something your task force  16 is involved in?  17 A. We don't directly do package  18 interdiction, but we have assisted with package  19 interdiction.  20 Q. And what is in those packages that  21 you are trying to interdict?  22 A. Money and drugs.  23 Q. Are all kinds of drugs involved in  24 those packages, or are there particular drugs  25 that --</p>
<p style="text-align: right;">Page 119</p> <p>1 problem that you've seen?  2 A. Yes.  3 Q. So anyway, you were talking about  4 the kinds of investigations you have run, when  5 you talked about going after a heroin supplier.  6 So would this be an investigation to try to  7 find a supplier and gather evidence against  8 them?  9 A. Exactly.  10 Q. What other kinds of investigations  11 have you run, relating to opioids?  12 A. Heroin is what we major -- our  13 focus would be on heroin/fentanyl. So that  14 would be it.  15 Q. Has that changed over the past 15  16 years?  17 A. Absolutely. We see more heroin and  18 fentanyl now than we did ten years ago plus.  19 Q. Now, we talked about earlier about  20 how there is more focus on the opioids now than  21 there used to be.  22 A. Right.  23 Q. Has there been a change over time  24 in the mix of what you are doing, relating to  25 opioids specifically?</p>	<p style="text-align: right;">Page 121</p> <p>1 A. All kind of drugs.  2 Q. I would like to ask the reporter to  3 mark as Connelly Exhibit 2 a document entitled  4 Ohio Drug Law Enforcement Application 2016.  5 - - - - -  6 (Thereupon, Deposition Exhibit 2, A  7 Document Entitled Ohio Drug Law  8 Enforcement Application 2016, was  9 marked for purposes of  10 identification.)  11 - - - - -  12 Q. And my first question for you,  13 Lieutenant Connelly, is whether you have ever  14 seen this before?  15 A. Yes, I have.  16 Q. Can you tell me what it is?  17 A. It is a grant application for the  18 Ohio Drug Law Enforcement Fund.  19 Q. And is this one of the grant  20 applications for the Northern Ohio Law  21 Enforcement Task Force?  22 A. Yes.  23 Q. And were you involved in preparing  24 this application?  25 A. Yes.</p>



<p style="text-align: right;">Page 122</p> <p>1 Q. And what was your involvement?</p> <p>2 A. I work with Dawn Heartsong on this</p> <p>3 application. I keep -- I provide her with</p> <p>4 up-to-date -- excuse me -- statistics. I kind</p> <p>5 of update whatever the problem statement may</p> <p>6 be.</p> <p>7 She and I work together on the</p> <p>8 basic information, and then she compiles</p> <p>9 everything and completes the application.</p> <p>10 Q. Is she an employee of the division</p> <p>11 of police?</p> <p>12 A. She is.</p> <p>13 Q. And what unit does she work with?</p> <p>14 A. The budget unit -- or, you know</p> <p>15 what, I'm not sure. I stand corrected. I</p> <p>16 don't think it is the budget. She is the</p> <p>17 grants coordinator, so I'm not sure what unit</p> <p>18 she is assigned to. I believe it is the budget</p> <p>19 unit. She is on the same floor.</p> <p>20 Q. If you would turn to the third page</p> <p>21 of the exhibit, which says Problem</p> <p>22 Statement/Target Population.</p> <p>23 A. Okay.</p> <p>24 Q. And there are then some text on</p> <p>25 this page. Were you involved in the drafting</p>	<p style="text-align: right;">Page 124</p> <p>1 Q. If you go about three-quarters of</p> <p>2 the way down the page, there is numbers -- some</p> <p>3 numbered paragraphs.</p> <p>4 There is numbered paragraph 3 or</p> <p>5 item 3 that says, quote, "Budget cuts have</p> <p>6 reduced the number of law enforcement officers</p> <p>7 employed by many police departments." Do you</p> <p>8 see that?</p> <p>9 A. I see that.</p> <p>10 Q. Why was that included in that</p> <p>11 application?</p> <p>12 A. It's included, I think, to show a</p> <p>13 need for increased sharing of assets and</p> <p>14 personnel, because many of the departments in</p> <p>15 Northeast Ohio, you know, have evidently lost</p> <p>16 their budgets, including Cleveland, we have</p> <p>17 lost people.</p> <p>18 So we are trying to do our best</p> <p>19 with what we have, and right now it is trying</p> <p>20 to put more people together so that we can</p> <p>21 focus on this problem.</p> <p>22 Q. And do you view this task force as</p> <p>23 a way that the Cleveland department can</p> <p>24 leverage resources?</p> <p>25 A. I do.</p>
<p style="text-align: right;">Page 123</p> <p>1 of this text?</p> <p>2 A. Yes, I was, some of it.</p> <p>3 Q. Is this a statement that basically</p> <p>4 gets reused and updated, from year to year?</p> <p>5 A. It is.</p> <p>6 Q. And you review and approve it</p> <p>7 before the grant application is submitted?</p> <p>8 A. I don't approve it. I review it,</p> <p>9 and I provide some information, and that</p> <p>10 information goes to Dawn, and I don't see it</p> <p>11 after that.</p> <p>12 Q. Well, if you see something wrong in</p> <p>13 it, do you point it out?</p> <p>14 A. I try to, yes.</p> <p>15 Q. And are you aware of any situation</p> <p>16 in which a -- excuse me.</p> <p>17 Are you aware of any occasion when</p> <p>18 a grant, one of these grant applications has</p> <p>19 been submitted with inaccurate information?</p> <p>20 A. Am I aware of the occasion?</p> <p>21 Q. Any occasion.</p> <p>22 A. I am not.</p> <p>23 Q. So an effort is made to make this</p> <p>24 accurate?</p> <p>25 A. I believe there is an effort, yes.</p>	<p style="text-align: right;">Page 125</p> <p>1 Q. The first paragraph of this Problem</p> <p>2 Statement/Target Population section refers to</p> <p>3 narcotics related -- I'm sorry?</p> <p>4 A. Are we on the same page?</p> <p>5 Q. We are on the same page. Still on</p> <p>6 the same page. The top, I've gone back to the</p> <p>7 stop, the very first sentence says, "Greater</p> <p>8 Cleveland continues to experience unacceptable</p> <p>9 narcotics-related violent crime, including</p> <p>10 homicides, assaults, burglaries, and other</p> <p>11 related crimes"; do you see that?</p> <p>12 A. Yes.</p> <p>13 Q. What is a -- how do you define a</p> <p>14 narcotics-related violent crime?</p> <p>15 A. My personal definition would be</p> <p>16 crimes related to persons that are possibly</p> <p>17 drug users, that are committing crimes in order</p> <p>18 to obtain drugs, so either steal money or steal</p> <p>19 drugs themselves.</p> <p>20 It could be violent crimes between</p> <p>21 two opposing drug dealers that, you know, end</p> <p>22 up in a shootout. It could be a home invasion</p> <p>23 of a family to steal money by a drug user. It</p> <p>24 could be a home invasion by one drug dealer</p> <p>25 against another drug dealer. We see a lot of</p>



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1 that. So that's what I'm looking at.  
 2 Q. Does the -- does your department do  
 3 anything to try to develop statistics about how  
 4 much of the crime experienced in Cleveland is  
 5 narcotics related?  
 6 A. I'm not involved in any of that, so  
 7 I'm not sure.  
 8 Q. Have you ever heard of anyone  
 9 trying to do that?  
 10 A. The city has somebody that compiles  
 11 statistics for all the crime within the city,  
 12 and am I aware if they are -- if the question  
 13 is if I'm aware if they are specifically  
 14 looking at this, I don't know. My answer is I  
 15 don't know.  
 16 Q. Has anybody ever asked you?  
 17 A. This is the first time I can  
 18 remember.  
 19 Q. Does your task force do any work  
 20 relating to violent crime, narcotics-related  
 21 violent crime?  
 22 A. Yes.  
 23 Q. And what work do you do?  
 24 A. We have, in the recent past, just  
 25 completed an investigation into some violent

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1 people that were robbing other drug dealers for  
 2 their product and then selling that product.  
 3 So that was one of our recent investigations.  
 4 So something in that direction.  
 5 And we also investigate some  
 6 gang-related crime, gang members that have been  
 7 identified as being violent and involved in the  
 8 drug trade. We have done those cases. We have  
 9 done cases involving the sales, illegal sales  
 10 of firearms. So similar cases. Those are the  
 11 kind of cases that we work.  
 12 Q. Are there ever -- are there ever  
 13 situations where you get a lead for an  
 14 investigation that you would like to conduct,  
 15 but you decide you don't have the resources to  
 16 conduct it?  
 17 A. There are. That does happen.  
 18 Q. How do you decide between different  
 19 investigations to devote your resources to?  
 20 A. You have to make a judgment call,  
 21 like many of us do in leadership, just to say,  
 22 okay, which one has the greater opportunity of  
 23 success, which one -- how many resources is  
 24 this going to take and can we actually -- do we  
 25 actually have the resources to do it, should we

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1 pass this on to another agency.  
 2 So that's kind of my train of  
 3 thought, when we are looking at it. Are we  
 4 already involved in an investigation that's  
 5 taking all our resources.  
 6 Q. Are there any other factors that  
 7 you take into account?  
 8 A. There may be, but I'm trying to  
 9 give you what I'm thinking, off the top of my  
 10 head.  
 11 Q. This paragraph, the first paragraph  
 12 then goes to talk about various drugs that are  
 13 an issue, including fentanyl, heroin,  
 14 methamphetamine, cocaine. In the course of  
 15 your work, do you find that drug trafficking  
 16 organizations typically specialize in one or  
 17 more of these, or are you often going after  
 18 somebody who is dealing in two or more of these  
 19 things?  
 20 MS. ZIMMERMANN: Object to form.  
 21 A. It's often that they diversify  
 22 their product, yes.  
 23 Q. So somebody who is selling heroin  
 24 may also be selling meth or cocaine?  
 25 A. In the Cleveland area, it is more

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1 likely heroin and cocaine, as meth. Meth is  
 2 not as emerging as the other two.  
 3 Q. Do any of the drug trafficking  
 4 organizations that you go after also sell  
 5 prescription opioids?  
 6 A. Do any of them also sell  
 7 prescription opioids?  
 8 Q. Yes.  
 9 A. Yes.  
 10 Q. How common is that?  
 11 A. It's not as common in our line of  
 12 work, because of the -- we are trying to -- we  
 13 try to focus on -- we are really more focused  
 14 on the heroin and the fentanyl aspect of it.  
 15 We will work a case with the pills, but we just  
 16 don't see that as much with the drug dealers  
 17 that we are investigating.  
 18 Q. Are you mostly looking at people at  
 19 the wholesale level --  
 20 A. Yes.  
 21 Q. -- as opposed to the street level?  
 22 A. That's correct.  
 23 Q. So the street -- the street dealer  
 24 may be more diversified than the wholesaler is?  
 25 A. I think the wholesalers could be

<p style="text-align: right;">Page 130</p> <p>1 diversified as well.</p> <p>2 Q. But if you -- if pills are being</p> <p>3 sold, prescription pills are being sold by one</p> <p>4 of your targets, that's not really the focus of</p> <p>5 your investigation; is that correct? You are</p> <p>6 more likely looking at heroin?</p> <p>7 A. Unless the pills beat -- if they</p> <p>8 start selling pills in bulk, then we will</p> <p>9 definitely focus on that. If they are selling</p> <p>10 smaller amounts of pills, then we may provide</p> <p>11 that information to another agency or another</p> <p>12 entity to follow up on that part of it, or it</p> <p>13 will just be added to our indictment in the</p> <p>14 end, but we definitely don't look the other</p> <p>15 way. I really --</p> <p>16 Q. Let me ask it a different way. If</p> <p>17 there is somebody who is diversified in selling</p> <p>18 heroin, maybe with fentanyl --</p> <p>19 A. Right.</p> <p>20 Q. -- and they are also selling some</p> <p>21 pills, is the driver of your investigation of</p> <p>22 them the heroin?</p> <p>23 A. The driver of our investigation is</p> <p>24 whatever we can make the best case from. So if</p> <p>25 we can make the best case from the pills, we</p>	<p style="text-align: right;">Page 132</p> <p>1 that was being a diverted prescription fentanyl</p> <p>2 product, as opposed to the bulk fentanyl coming</p> <p>3 in from China or Mexico?</p> <p>4 A. I have not.</p> <p>5 Q. If you would turn to the next page,</p> <p>6 it is actually page 4 of the application.</p> <p>7 Again, I want to actually go to the bottom.</p> <p>8 There is a -- it talks about Cuyahoga County.</p> <p>9 Do you see that at the very bottom?</p> <p>10 A. "Cuyahoga County is a heavily</p> <p>11 populated county"?</p> <p>12 Q. Yes.</p> <p>13 A. Okay.</p> <p>14 Q. And it says, "We basically have an</p> <p>15 east side task force and a west side task force</p> <p>16 that handles issues specific to their areas";</p> <p>17 do you see that?</p> <p>18 A. Yes.</p> <p>19 Q. Is that referring to just to</p> <p>20 Cuyahoga County, is it referring to your task</p> <p>21 force?</p> <p>22 A. There is other task forces that</p> <p>23 Cleveland does not participate in. So that's</p> <p>24 what they are talking about.</p> <p>25 There is an east side suburban task</p>
<p style="text-align: right;">Page 131</p> <p>1 will focus on the pills. If we can make the</p> <p>2 best case from the heroin, then we will focus</p> <p>3 on the heroin.</p> <p>4 If our source can only focus on one</p> <p>5 of those two, then we have to go in the</p> <p>6 direction of the source. So the sources and</p> <p>7 the cases kind of define themselves.</p> <p>8 That being said -- it's difficult</p> <p>9 for me to answer your question. I'm sorry.</p> <p>10 Q. Well, let me ask you this: In the</p> <p>11 past five years, how many of your</p> <p>12 investigations -- in how many of your</p> <p>13 investigations have the pills been the driver</p> <p>14 of what you were going after, as opposed to</p> <p>15 heroin or something else?</p> <p>16 A. A small percentage. A very small</p> <p>17 percentage.</p> <p>18 Q. Where does the fentanyl and the</p> <p>19 heroin that you are investigating come from?</p> <p>20 A. The source for most of the heroin</p> <p>21 and fentanyl that we see in our Greater</p> <p>22 Cleveland area is Mexico.</p> <p>23 Q. Any other sources?</p> <p>24 A. China.</p> <p>25 Q. Have you come across any fentanyl</p>	<p style="text-align: right;">Page 133</p> <p>1 force and a west side suburban task force.</p> <p>2 Q. And the next sentence says that</p> <p>3 your task force is investigating the entire</p> <p>4 county and surrounding counties; is that</p> <p>5 correct?</p> <p>6 A. Correct.</p> <p>7 Q. But you do not investigate Summit</p> <p>8 County; is that correct?</p> <p>9 A. Well, will investigate -- we will</p> <p>10 take our investigation to wherever it leads us.</p> <p>11 So if somebody from Summit County is</p> <p>12 selling -- is driving to Cleveland and selling</p> <p>13 drugs out here, we will follow that case to</p> <p>14 Summit County. So that would be the exception.</p> <p>15 We focus on what is happening here, but we will</p> <p>16 follow it to where it leads us.</p> <p>17 Q. Now, in those situations in the</p> <p>18 past five years where you have had</p> <p>19 investigations that have involved prescription</p> <p>20 opioids, where have those come from, or do you</p> <p>21 know?</p> <p>22 A. The origin of the opioids?</p> <p>23 Q. Yes.</p> <p>24 A. I don't know.</p> <p>25 Q. Is that something you investigate?</p>

<p style="text-align: right;">Page 134</p> <p>1 A. We normally pass those</p> <p>2 investigations off to the compliance people.</p> <p>3 Q. And that would be the compliance</p> <p>4 people in the Cleveland --</p> <p>5 A. Either the Cleveland or the DEA</p> <p>6 compliance task force. I'm not sure if they</p> <p>7 call themselves the compliance task force, but</p> <p>8 the pill, the DEA's pill investigations.</p> <p>9 Q. And who do you interact with at DEA</p> <p>10 on that?</p> <p>11 A. Keith Martin.</p> <p>12 Q. Anyone else?</p> <p>13 A. He's who I normally would talk to.</p> <p>14 We have some other agents, but Keith is, kind</p> <p>15 of, our point person.</p> <p>16 Q. How long has that been the case?</p> <p>17 A. For maybe three years now, with</p> <p>18 Keith.</p> <p>19 Q. Before him, who was it?</p> <p>20 A. Geno Corley was the agent in charge</p> <p>21 at that time. We had detective -- or Agent</p> <p>22 Fitzpatrick assigned to the task force for a</p> <p>23 while, so at that time Agent Fitzpatrick would</p> <p>24 have been our point person.</p> <p>25 Q. Is there anyone from the DEA on</p>	<p style="text-align: right;">Page 136</p> <p>1 Q. Today?</p> <p>2 A. Today.</p> <p>3 Q. And so previously Coast Guard?</p> <p>4 A. Coast Guard, correct.</p> <p>5 Q. But they pulled back?</p> <p>6 A. They did. And I think it was a</p> <p>7 personnel issue, just numbers again.</p> <p>8 Q. Has the task force been the same</p> <p>9 size, throughout the time you have been on it?</p> <p>10 A. It's been close to the same size,</p> <p>11 yes.</p> <p>12 Q. If you would turn to page 6, it has</p> <p>13 a list of project objectives.</p> <p>14 A. Yes.</p> <p>15 Q. Were you involved in selecting the</p> <p>16 project objectives?</p> <p>17 A. Yes.</p> <p>18 Q. Was anybody else involved in that?</p> <p>19 A. Special Agent Dekatch, but</p> <p>20 primarily me.</p> <p>21 Q. And were these project objectives</p> <p>22 for the task force as a whole or for</p> <p>23 Cleveland's participation in it?</p> <p>24 A. No, no. The task force as a whole.</p> <p>25 Q. And the first objective listed here</p>
<p style="text-align: right;">Page 135</p> <p>1 your task force?</p> <p>2 A. Not right now.</p> <p>3 Q. But there used to be?</p> <p>4 A. Yes.</p> <p>5 Q. And when did that end?</p> <p>6 A. Maybe two years ago.</p> <p>7 Q. Do you know why it ended?</p> <p>8 A. The two agents, although assigned</p> <p>9 to our task force, had other duties that they</p> <p>10 were responsible for with DEA, and it seemed</p> <p>11 like it was just too much for them, and I think</p> <p>12 they pulled them both back.</p> <p>13 Q. Was that a blow for you?</p> <p>14 A. It was, but, you know, there is</p> <p>15 some influx, with people coming and going.</p> <p>16 Q. Are there any other federal</p> <p>17 agencies that have contributed personnel to the</p> <p>18 task force, other than the FBI?</p> <p>19 A. Homeland Security, border patrol,</p> <p>20 U.S. Coast Guard investigator, IRS</p> <p>21 investigators.</p> <p>22 Q. Are those all -- do you have people</p> <p>23 from each of those agencies today?</p> <p>24 A. I do not. IRS, border patrol and</p> <p>25 FBI.</p>	<p style="text-align: right;">Page 137</p> <p>1 is, it says, "The NOLETF will maintain the</p> <p>2 number of heroin cases investigated during the</p> <p>3 grant period"; do you see that?</p> <p>4 A. Yes.</p> <p>5 Q. And then it says, under Baseline</p> <p>6 Number, it says, "Three heroin cases were</p> <p>7 investigated in 2016"?</p> <p>8 A. Correct.</p> <p>9 Q. Is that an accurate statement?</p> <p>10 A. Yes.</p> <p>11 Q. Is three a lot, or is it not very</p> <p>12 many?</p> <p>13 MS. ZIMMERMANN: Object to form.</p> <p>14 A. In our case, three is about</p> <p>15 capacity. Our cases take a long time to</p> <p>16 investigate, and they are drawn out over</p> <p>17 months. So when I say three, when we are</p> <p>18 looking at three cases, I'm talking about three</p> <p>19 major cases.</p> <p>20 We sometimes will do smaller-level</p> <p>21 cases that don't go anywhere, we will make a</p> <p>22 drug buy, where I'm able to follow up, you</p> <p>23 know, but when I talk about three cases, I'm</p> <p>24 talking about three major cases, where we are</p> <p>25 moving up the ladder.</p>

<p style="text-align: right;">Page 138</p> <p>1 Q. How many did you, in fact, 2 investigate, in the following year? 3 A. In 2016? 4 Q. Well, it says there were three in 5 2016. So how many were there in 2017? 6 A. It could be three. I would have to 7 look. I don't have that number in front of me. 8 Q. Do you know how many there were in 9 2015? 10 A. Heroin cases, I don't. Well, it 11 says the same, so I'm going to guess three. So 12 it says, "I will maintain the number of" -- 13 Q. Well, this is -- the application is 14 dated 2017 so... 15 A. It says, "I will maintain the 16 number of heroin cases in the grant period," 17 right? 18 Q. Yes. All right. Do you know, 19 was the three -- whatever period we are talking 20 about, was that a consistent number that you 21 maintained, from year to year? 22 A. I can't say that it was a 23 consistent number. It depends on how long the 24 case takes to come to an end. One case could 25 last three months, the next case could last</p>	<p style="text-align: right;">Page 140</p> <p>1 says that you will increase by one the number 2 of methamphetamine cases? 3 A. Yes. 4 Q. And what was the reason for that 5 change? 6 A. We had noticed that some of our 7 heroin dealers were trying to also sell my 8 investigators or our sources methamphetamine. 9 So we saw that as something that was trying to 10 make an emergence into our area. So I thought 11 that we should follow that lead. 12 Q. Did you, in fact, make that 13 increase? 14 A. We did. 15 Q. Those are the only two project 16 objectives that are listed here. Is there a 17 reason you didn't include any others? 18 A. I'm only required to have two, so 19 we had two, and if we do more, you know, then 20 that's a good thing. 21 Q. Would it be fair to say that these 22 were your two primary objectives? 23 A. Yes. 24 Q. Were these your two primary 25 objectives in each year for the past five to</p>
<p style="text-align: right;">Page 139</p> <p>1 nine months. 2 So I -- and when I give that number 3 three, if it's two, then it's two, if it's 4 four, then it's four. It all depends on where 5 the case takes us and how soon the case ends 6 and when we could start another case, do we 7 have another case ready to go after this one 8 ends. 9 So I'm not sure if that's answering 10 your question. 11 Q. It is helpful. Is your 12 level -- how far back could you go at the same 13 level of effort, no matter how it gets counted, 14 the number of cases? 15 MS. ZIMMERMANN: Object to form. 16 A. Could you rephrase that. 17 Q. At this time you were at a level of 18 effort that resulted in three cases. 19 A. Okay. 20 Q. And how long had you been working 21 at that level of effort, on heroin cases? 22 A. I would have to look at the case 23 files or talk to the case detectives. Some of 24 those cases may still be going. 25 Q. Well, the second project objective</p>	<p style="text-align: right;">Page 141</p> <p>1 ten years? 2 A. No. 3 Q. At what time was there a different 4 primary objective? 5 A. The focus on heroin changed. We 6 focused most of our investigations on cocaine 7 early on, and then our focus changed to heroin, 8 when we started seeing all the deaths. 9 Q. When did the change from cocaine to 10 heroin occur? 11 A. It is a broad question. 12 MS. ZIMMERMANN: Object to form. 13 Go ahead. 14 Q. Well, you said that you changed, 15 your focus changed? 16 A. Our focus changed, but then there 17 is a difference between when our focus changed 18 and when -- are we talking, like, in the 19 county, are we talking about the city, are we 20 talking about my task force? 21 Q. Let's talk about your task force. 22 A. Okay. 23 Q. At what time did the focus of the 24 task force change from cocaine to heroin? 25 A. Probably maybe in 2015.</p>

<p style="text-align: right;">Page 142</p> <p>1 Q. Had the focus within the City of 2 Cleveland changed before that or after that? 3 A. That means I'm hungry. 4 MS. ZIMMERMANN: We are close to 5 12:30. 6 Q. We will get there. 7 A. I'm sorry. Let's start over again. 8 My apologies. 9 Q. Did the focus within the Cleveland 10 Police Department change at a different time? 11 A. I believe they did. I think their 12 focus was changing before ours changed. 13 Q. And why was that? 14 A. We were already involved in some 15 investigations and, like I said, these 16 investigations can take months and sometimes a 17 year. They are reacting to what is happening 18 right now. So when they are on the ground and 19 they see what is happening, they react to it 20 more quickly than we can, because we have to 21 start our investigation, and then it takes time 22 for us to put all of the other players in 23 place. 24 So the city can react much more 25 quickly with their ground-level investigations</p>	<p style="text-align: right;">Page 144</p> <p>1 opioids? 2 A. I don't remember specific 3 investigations. 4 Q. When was the first time you think 5 you had an investigation involving prescription 6 opioids? 7 A. With the task force? 8 Q. With the task force. 9 A. Maybe 2015, and that is a guess. 10 THE WITNESS: We need to take a 11 break. 12 Q. Can you go a few more minutes? We 13 can take a break now if you need to, but that 14 will just make the afternoon longer. 15 MS. ZIMMERMANN: I think he wants 16 to run into lunch, and we said 12:30, and we're 17 ten minutes out. 18 A. I can wait ten minutes, but it's up 19 to you guys. 20 Q. This is up to you. 21 A. Ten minutes. 22 Q. Okay. Got it. 23 A. If my stomach keeps on growling, 24 it's going to be shorter. 25 MS. ZIMMERMANN: They can edit out</p>
<p style="text-align: right;">Page 143</p> <p>1 than we can, as a task force. 2 Q. So before 2015, the task force's 3 priorities were cocaine and meth; is that 4 correct? 5 A. No. Cocaine and heroin. 6 Q. Cocaine and heroin. Okay. And the 7 meth made it back on the list when? 8 A. I don't know if meth was on the 9 list before. Meth is a recent -- recently 10 introduced into the Cleveland area, at a higher 11 level, which is why it ended up as one of my 12 objectives. 13 Q. I see. Okay. 14 Going back to the beginning of your 15 time with the task force, were the objectives, 16 the top objectives then cocaine and heroin, up 17 until 2015, or had there been any other changes 18 during that time? 19 A. I think our focus was always on 20 cocaine and heroin. Cocaine was probably our 21 top concern, early in my time with the task 22 force, and then as this emerged as a threat, 23 then we tried to focus more and more on that. 24 Q. Did you, in those early years, did 25 you have investigations involving prescription</p>	<p style="text-align: right;">Page 145</p> <p>1 the growling sound. 2 Q. By the way, was your task force 3 once known as the Caribbean Gang Task Force? 4 A. That's correct. 5 Q. And when was it called that? 6 A. That, I think, would have been the 7 mid to late 90s, during the 90s. 8 Q. And why was it called that? 9 A. Because the City of Cleveland and 10 Greater Cleveland had an influx of violent 11 narcotics that came in from the Caribbean area, 12 and I think specifically it would have been 13 Jamaica, and they put a task force together to 14 try to quell that violence that was occurring. 15 Q. If you would turn to page 13 of the 16 exhibit. This is still Exhibit 2. 17 This is the Budget Request By 18 Resource; do you see that? 19 A. Yes. 20 Q. And the first line item is OCJS 21 Funds Requested? 22 A. Uh-huh. 23 Q. And is that the amount that's being 24 requested in this grant application for the 25 grant?</p>



<p style="text-align: right;">Page 146</p> <p>1 A. So OCJS provides the 177,000, and</p> <p>2 the city has to provide a match, a matching</p> <p>3 fund. So where you see the cash match, that's</p> <p>4 the \$5,9402.</p> <p>5 Q. But you are asking for a grant of</p> <p>6 177,000?</p> <p>7 A. Correct.</p> <p>8 Q. And do you know where the cash</p> <p>9 match funds come from?</p> <p>10 A. It is my belief they come from the</p> <p>11 law enforcement trust fund of the City of</p> <p>12 Cleveland.</p> <p>13 Q. And what is the law enforcement</p> <p>14 trust fund of the City of Cleveland?</p> <p>15 A. It is a fund where assets seized,</p> <p>16 they liquefy those assets and they place them</p> <p>17 into a fund. Those funds can only be used for</p> <p>18 certain law enforcement functions, training,</p> <p>19 equipment.</p> <p>20 There is a limited amount of areas</p> <p>21 that you could use them, but it has to be for</p> <p>22 law enforcement purposes. So the city can't</p> <p>23 take the money and use it for whatever they</p> <p>24 wants. They need been to be funneled back into</p> <p>25 law enforcement.</p>	<p style="text-align: right;">Page 148</p> <p>1 Q. The Cleveland Law Enforcement Trust</p> <p>2 Fund.</p> <p>3 A. You know, I'm not sure. I'm sure</p> <p>4 there are other task forces that make seizures,</p> <p>5 but where the money ends up, I'm not sure.</p> <p>6 Q. Do you know -- first of all, who</p> <p>7 would be the expert on that subject?</p> <p>8 A. Somebody in the administrative ops,</p> <p>9 budget, probably the budget unit.</p> <p>10 Q. Do you know how much money is in</p> <p>11 the Cleveland Law Enforcement Trust Fund?</p> <p>12 A. I don't.</p> <p>13 Q. Do you know what</p> <p>14 activities -- which units get payments out of</p> <p>15 the trust fund?</p> <p>16 A. I don't.</p> <p>17 Q. But your task force is one of them?</p> <p>18 A. Yes.</p> <p>19 Q. And how long has your task force</p> <p>20 been receiving funds from the trust fund?</p> <p>21 A. The whole time I have been there.</p> <p>22 Q. So is all of the cash -- let me</p> <p>23 start that again.</p> <p>24 Has the cash match that the city</p> <p>25 makes for this grant been taken from this trust</p>
<p style="text-align: right;">Page 147</p> <p>1 Q. So if you arrest a drug dealer and</p> <p>2 he's got \$50,000 in cash, they could seize --</p> <p>3 that might go into this trust fund?</p> <p>4 A. Yes.</p> <p>5 Q. What happens to funds that are</p> <p>6 seized in arrests made by the task force?</p> <p>7 A. The task force has its own law</p> <p>8 enforcement trust fund, and the moneys would go</p> <p>9 into that pool, the trust fund pool, and then</p> <p>10 it is shared amongst the agencies that</p> <p>11 participate in the task force.</p> <p>12 Q. So Cleveland would get a chunk of</p> <p>13 that money back?</p> <p>14 A. Correct.</p> <p>15 Q. And would that money then go into</p> <p>16 the Cleveland Law Enforcement Trust Fund?</p> <p>17 A. Yes.</p> <p>18 Q. And then the other seizures that go</p> <p>19 into the trust fund would be from seizures made</p> <p>20 by Cleveland police officers?</p> <p>21 A. Correct.</p> <p>22 Q. Are there any other sources, other</p> <p>23 task forces that make seizures that go into</p> <p>24 that trust fund?</p> <p>25 A. Into which trust fund?</p>	<p style="text-align: right;">Page 149</p> <p>1 fund for as long as you can remember?</p> <p>2 A. Yes.</p> <p>3 Q. Is the City of Cleveland out of</p> <p>4 pocket for anything relating to the task force,</p> <p>5 other than the salaries of the officers and the</p> <p>6 equipment you referred to earlier?</p> <p>7 A. I think I would have considered</p> <p>8 whatever their cash match would be part of</p> <p>9 their out of pocket, right? And then</p> <p>10 whatever --</p> <p>11 Q. Apart from what comes out of the</p> <p>12 trust fund --</p> <p>13 A. Right.</p> <p>14 Q. -- let me clarify that. Let me ask</p> <p>15 it again so I'm clearer.</p> <p>16 A. Sure.</p> <p>17 Q. So apart from what gets paid out of</p> <p>18 the law enforcement trust fund --</p> <p>19 A. Okay.</p> <p>20 Q. -- is the City of Cleveland --</p> <p>21 what, if anything, does the City of Cleveland</p> <p>22 pay for, for your task force?</p> <p>23 A. The salaries. That's it. I would</p> <p>24 say the salaries for the officers that are</p> <p>25 involved.</p>

<p style="text-align: right;">Page 150</p> <p>1 Q. But the overtime gets paid by the</p> <p>2 grant, correct?</p> <p>3 A. The overtime gets paid by the</p> <p>4 grants, unless that overtime would run out, but</p> <p>5 it hasn't. So we have been able to maintain</p> <p>6 our overtime with the grant funding, the grant</p> <p>7 funding and something that is called OCDETF,</p> <p>8 which is another federal funding method that</p> <p>9 comes through the justice department.</p> <p>10 Q. And is that also used for overtime?</p> <p>11 A. It is used for overtime, correct.</p> <p>12 Q. Who is Robert Dunn?</p> <p>13 A. He's a Cleveland police -- maybe a</p> <p>14 lieutenant.</p> <p>15 Q. Sergeant maybe?</p> <p>16 A. Sergeant. I know him. I don't</p> <p>17 know where he is assigned.</p> <p>18 Q. Do you know what he does?</p> <p>19 A. I don't.</p> <p>20 Q. Do you know what Todd Wiles does?</p> <p>21 A. Once again, I know the name, but I</p> <p>22 don't know what he does.</p> <p>23 Q. How about John Prince?</p> <p>24 A. John Prince is a compliance</p> <p>25 detective.</p>	<p style="text-align: right;">Page 152</p> <p>1 A. Calvin Williams?</p> <p>2 Q. Yes.</p> <p>3 A. Very rarely, but I do sometimes.</p> <p>4 Q. Harold Pretel?</p> <p>5 A. He's the detective chief of</p> <p>6 Homeland Security operations.</p> <p>7 Q. And does he have any involvement</p> <p>8 with any opioid-related issues?</p> <p>9 A. I think Commander Gingell handles</p> <p>10 almost all of that. He would provide the</p> <p>11 deputy chief with information.</p> <p>12 Q. Then Matthew Baeppler?</p> <p>13 A. He's the current supervisor of the</p> <p>14 HIDI squad.</p> <p>15 Q. Kristin Riley?</p> <p>16 A. She is a lieutenant of police. She</p> <p>17 works for the deputy chief as his</p> <p>18 administrative assistant.</p> <p>19 Q. Is she a lieutenant?</p> <p>20 A. She is.</p> <p>21 Q. So she is the administrative for</p> <p>22 the deputy -- which deputy chief?</p> <p>23 A. Detective Chief Harold Pretel.</p> <p>24 Q. Does she do anything related to</p> <p>25 opioid-related issues?</p>
<p style="text-align: right;">Page 151</p> <p>1 Q. And he's the one that's been there</p> <p>2 a long time, right?</p> <p>3 A. Yes.</p> <p>4 Q. Scott Moran?</p> <p>5 A. He's assigned to the HIDI squad.</p> <p>6 Q. So he reports --</p> <p>7 A. He's a detective assigned to the</p> <p>8 HIDI squad. He reports directly to Sergeant</p> <p>9 Baeppler.</p> <p>10 Q. Who then reports to you?</p> <p>11 A. Correct.</p> <p>12 Q. Rick Pollack?</p> <p>13 A. He's an administrative officer</p> <p>14 assigned to Bureau of Special Services.</p> <p>15 Q. And do you have any interactions</p> <p>16 with him?</p> <p>17 A. He's -- I mean, he's like admin</p> <p>18 guy. So he helps the commander out. He does</p> <p>19 timekeeping, he keeps timekeeping issues,</p> <p>20 payroll, that kind of thing.</p> <p>21 Q. Jennifer DiGregorio?</p> <p>22 A. She's the commander's</p> <p>23 administrative assistant.</p> <p>24 Q. I know who Calvin Williams is. Do</p> <p>25 you ever interact with him?</p>	<p style="text-align: right;">Page 153</p> <p>1 A. Not that I know of.</p> <p>2 Q. Reginald Lanton?</p> <p>3 A. I know the name, but I'm not sure</p> <p>4 what he does.</p> <p>5 Q. Somebody in public information;</p> <p>6 does that sound right?</p> <p>7 A. He could be.</p> <p>8 Q. Michael Ward?</p> <p>9 A. He's our administrative sergeant,</p> <p>10 but he also supervised the HIDI squad.</p> <p>11 Q. Louis Pipoly?</p> <p>12 A. Former lieutenant from narcotics,</p> <p>13 now reassigned to one of the districts.</p> <p>14 Q. And what did he do, when he was</p> <p>15 with narcotics?</p> <p>16 A. He was -- I think he did some</p> <p>17 package interdiction. I think he also helped</p> <p>18 with HIDI squads.</p> <p>19 Q. Matt Putnam?</p> <p>20 A. Sergeant Putnam is a sergeant in</p> <p>21 charge of one of the GIU squads. So that would</p> <p>22 be the gang investigation unit squads.</p> <p>23 Q. Does he have any involvement in</p> <p>24 opioid investigations?</p> <p>25 A. They may. The gang units sometimes</p>

<p style="text-align: right;">Page 154</p> <p>1 does narcotics investigations as well.  2 Q. And that's as part of their gang  3 work?  4 A. Correct. So not part of the HIDI,  5 but just part of their street investigations.  6 Q. James Purcell?  7 A. Former lieutenant of narcotics, ran  8 the HIDI squad, did some package interdiction,  9 has been promoted to a captain, and now works  10 crisis intervention.  11 Q. Tim Haven?  12 A. Sergeant in charge of the violent  13 fugitive task force.  14 Q. Does he have any involvement in  15 opioid-related issues?  16 A. No.  17 Q. Michael McGrath?  18 A. Former chief of police, current  19 safety director.  20 Q. In recent years, has he had any  21 involvement in opioid issues?  22 A. Not that I know of.  23 Q. Did he used to?  24 A. Not that I know of.  25 Q. Edward Tomba, we talked about him</p>	<p style="text-align: right;">Page 156</p> <p>1 administrative ops, former commander in charge  2 of a district. So he's an admin person.  3 Q. Anything specific to opioids, that  4 you are aware of?  5 A. A lot of budgeting stuff, you know,  6 that kind of thing.  7 Q. Let's do two more, then we will  8 take a break for lunch. How's that?  9 A. Okay.  10 Q. Joseph Bovenzi?  11 A. Sergeant Joe Bovenzi, originally  12 assigned as a narcotics detective, then was  13 promoted to state of narcotics, is running the  14 hotel interdiction team, and he's kind of my  15 number two guy.  16 Q. Oh, is he. Okay.  17 A. Yeah.  18 Q. Is he involved in any task force  19 activities?  20 A. Sometimes. Like if I'm off, then  21 he will have to cover for me.  22 Q. Does he also work on the HIDI  23 stuff?  24 A. He has, yes.  25 Q. And then Jennifer Ciaccia?</p>
<p style="text-align: right;">Page 155</p> <p>1 before.  2 A. Detective chief, retired.  3 Commander Gingell would have reported directly  4 to him.  5 Q. Joellen O'Neill?  6 A. Joellen O'Neill.  7 Q. Joellen O'Neill.  8 A. She is a deputy chief, but she is  9 the administrative, I guess you would call it,  10 executive officer, deputy chief executive  11 officer on this. So she works directly for  12 the -- directly under the chief.  13 Q. On what?  14 A. On any matters that the chief asks  15 her to work, but nothing that I would know of  16 that would be directly related to opioids.  17 Q. How about Dornat Drummond?  18 A. Deputy chief of field operations.  19 So he's in charge of all the police commanders  20 in all the districts, uniform.  21 Q. Has he had any specific involvement  22 previously on narcotics?  23 A. Not that I'm aware of.  24 Q. Deon McCaulley?  25 A. He's a deputy chief of police,</p>	<p style="text-align: right;">Page 157</p> <p>1 A. She is the PIF, public information  2 officer.  3 Q. Okay.  4 A. So I said the one I can't spell her  5 last name.  6 Q. Well, we have the spelling.  7 MS. ZIMMERMANN: I think we could  8 go off the record now.  9 THE VIDEOGRAPHER: Off the record,  10 12:31.  11 (Recess taken.)  12 THE VIDEOGRAPHER: On the record,  13 1:21.  14 Q. Good afternoon.  15 A. Good afternoon.  16 Q. I generally like to ask, around  17 this time in a deposition, if a witness thinks  18 that there is anything they want to correct or  19 change from their testimony from the morning.  20 I'm not trying to put you on the spot. If  21 there is anything you want to say, I just want  22 to give you the chance.  23 A. I don't think so, off the top of my  24 head.  25 Q. Okay. Well, if there is anything</p>

<p style="text-align: right;">Page 158</p> <p>1 that occurs to you, you misspoke or something,  2 you should feel free to speak up.  3 A. Okay.  4 Q. We were going through a list of  5 names, and I think we were about halfway  6 through the list. So let me finish that, and  7 I'll ask you if you know who these people are  8 and if they have anything, to your knowledge,  9 to do with -- or have had anything to do with  10 opioid-related issues.  11 And the next one -- I shouldn't  12 have started with this one, I don't know if I  13 can spell it -- pronounce it. Dlugolinski?  14 A. John Dlugolinski.  15 Q. Dlugolinski.  16 A. D-L-U-G-O-L-I-N-I-S-K-I.  17 Q. Yes. She's got the list, so she'll  18 will be able to spell.  19 A. I'm only kidding.  20 Q. Who is he?  21 A. He is a detective assigned to the  22 narcotics unit. He does have a dual role.  23 He's assigned to the HIDI team as well as  24 homeland security investigations TFO.  25 Q. And how long has he been doing</p>	<p style="text-align: right;">Page 160</p> <p>1 A. Not Thomas Cline.  2 Q. City of Cleveland Police Narcotics  3 Unit, if there were such a person, you would at  4 least know the name?  5 A. Well, as we go down the list, we  6 may go back to that one, I can let you know, if  7 we don't come up with another name.  8 Q. Okay. Ali Pillow?  9 A. He was a sergeant assigned to the  10 gang squad. I don't think he was ever assigned  11 to narcotics. Currently a lieutenant in charge  12 of homicide.  13 Q. Edna Orozco?  14 A. Edna is the chief's secretary.  15 Q. Carla Ellis?  16 A. Carla Ellis is currently a  17 lieutenant assigned to personnel, I believe.  18 Q. Any prior involvement with anything  19 relating to narcotics?  20 A. Not that I know of.  21 Q. Johnny Johnson?  22 A. Johnny Johnson is a commander in  23 charge of community policing.  24 Q. And what is community policing in  25 Cleveland?</p>
<p style="text-align: right;">Page 159</p> <p>1 that, the narcotics unit?  2 A. Narcotics, he's been in narcotics  3 longer than me. So before 2005.  4 Q. John Cline?  5 A. John Cline is a HIDI detective as  6 well, he has been assigned to the HIDI squad  7 since it started, been in narcotics probably  8 six or seven years.  9 Q. When did the HIDI squad start?  10 A. I was not there when it started,  11 but I believe in 2014.  12 Q. Does 2013 sound right?  13 A. It could be. Like I said, I wasn't  14 there when it originally started. I wasn't  15 assigned to the HIDI squad when it first  16 started.  17 Q. Thomas Cline?  18 A. I don't know Thomas Cline.  19 Q. C-L-I-N-E. Maybe that's a  20 misspelling.  21 A. John Cline, we just talked about.  22 Q. We just did John Cline, but the  23 next person on the list I was given is Thomas  24 Cline. I wonder if someone typed the wrong  25 thing. That's not ringing any bells?</p>	<p style="text-align: right;">Page 161</p> <p>1 A. They do a lot of outreach to the  2 schools and children and go to community  3 meetings, stuff like that.  4 Q. Matthew Gallagher?  5 A. Matt Gallagher, I believe he is  6 lieutenant assigned to the -- I think his  7 current assignment is the police academy.  8 Q. Had he previously had any  9 involvement with opioid-related issues?  10 A. I don't know what his prior  11 assignments were. He might have been a vice  12 sergeant or -- I'm not aware.  13 Q. Was he ever in the narcotics unit?  14 A. Not that I'm aware of.  15 Q. Deidra Jones?  16 A. She is also a police commander,  17 personnel. I think she was -- I'm not sure if  18 she was in community policing or not before  19 that. I don't know. I don't have any  20 knowledge of what she may have done, as far as  21 the opioid side.  22 Q. Brian Heffernan we talked about,  23 correct?  24 A. Right.  25 Q. Former captain?</p>

<p style="text-align: right;">Page 162</p> <p>1 A. Captain, and then former commander.  2 Q. William Traine?  3 A. William Traine.  4 Q. It says, former supervisor City of  5 Cleveland police?  6 A. He's retired. He's been retired  7 for a little while. He was a vice supervisor  8 for a while. That's all I know.  9 Q. James Chura?  10 A. He is a captain, Cleveland police  11 captain, former Cleveland police commander.  12 I'm not sure where he is currently assigned. I  13 believe the second district.  14 Q. Any involvement with opioids that  15 you are aware of?  16 A. He is in the second district, so he  17 may have some involvement in the opioids,  18 because second district is one of our hotbed  19 areas.  20 Q. Allen Benkalowycz?  21 A. Don't know.  22 Q. A sergeant?  23 A. I know the name, but I don't know  24 where he is assigned. I don't know what his  25 assignment is.</p>	<p style="text-align: right;">Page 164</p> <p>1 A. Patrick Stephens was the task force  2 commander before me, and was promoted to  3 commander and commanded the Cleveland police  4 third district.  5 Q. And he is now retired?  6 A. Correct.  7 Q. Daniel Fay?  8 A. Daniel Fay is the first district  9 police commander.  10 Q. And so his knowledge of opioids  11 would be in that context?  12 A. Yeah.  13 Q. Thomas Stacho?  14 A. He would be the second district  15 police commander.  16 Q. And same involvement with opioids?  17 A. Yes. How it affected his -- you  18 know, people in his community.  19 Q. Thomas McCartney?  20 A. He is currently the third district  21 police commander, and formerly the first  22 district police commander.  23 Q. Brandon Kutz?  24 A. Brandon Kutz is the fourth district  25 police commander.</p>
<p style="text-align: right;">Page 163</p> <p>1 Q. And we talked about Dawn Heartsong  2 already.  3 A. Right.  4 Q. William Holby?  5 A. I'm not sure where he's assigned  6 either.  7 Q. Ronald Timm?  8 A. Retired Cleveland police  9 lieutenant, formerly assigned to the homicide.  10 Q. Thomas Dillon?  11 A. He is a police lieutenant as well,  12 I think. I'm not sure where his assignment is.  13 Q. Any involvement with the narcotics,  14 that you are aware of?  15 A. Not that I'm aware of.  16 Q. And when I say, "Involvement with  17 narcotics," you understand I mean involvement  18 in his police capacity?  19 A. Correct.  20 Q. Keith Sulzer?  21 A. Sergeant Keith Sulzer, he is  22 assigned to the violent fugitive task force. I  23 don't think he has any involvement with the  24 opioids.  25 Q. Patrick Stephens?</p>	<p style="text-align: right;">Page 165</p> <p>1 Q. I think we are into the list of  2 police commanders.  3 A. Right.  4 Q. District commanders.  5 Sammy Morris?  6 A. Sammy Morris is currently the fifth  7 district police commander.  8 Q. And again, the focus, that's the  9 focus of his narcotics knowledge, as far as you  10 know?  11 A. He's former vice sergeant, so he  12 does have a pretty good background, former vice  13 detective.  14 Q. Shelley Patena?  15 A. Shelley Patena is currently  16 assigned to the narcotics unit and works on the  17 compliance team.  18 Q. Franklyn Lake?  19 A. Franklyn Lake is a narcotics  20 detective, assigned to the HIDI squad.  21 Q. Thomas Klamert?  22 A. Thomas Klamert is Cleveland police  23 narcotics detective, assigned to the HIDI  24 squad.  25 Q. Anthony Gorsek?</p>



<p style="text-align: right;">Page 166</p> <p>1 A. Anthony Gorsek, I think, is 2 retired, and formerly assigned to the chief's 3 office. 4 Q. Paul Burgio? 5 A. Paul Burgio is a detective. I 6 believe he's assigned to the fusion center -- 7 Q. What's the -- 8 A. -- which is like an intelligence, 9 like a portion of the -- I think it falls under 10 homeland security operations. 11 Q. And does that center have any 12 involvement in narcotics investigations? 13 A. I don't know if they gather intel 14 and put out work product. They may. I can't 15 think of it, off the top of my head, if they 16 do. 17 Q. Okay. So let's talk about the 18 HIDI. Is it HIDI squad, or what is it called? 19 A. Team I think they call it. 20 Q. HIDI team. For what purpose was 21 the HIDI team created, to your knowledge? 22 A. They were created as a result of 23 what we see as a crisis, opioid crisis in our 24 city. 25 Q. Was the crisis already well</p>	<p style="text-align: right;">Page 168</p> <p>1 Q. Well, I would like to ask you to 2 sort of take us through how a HIDI 3 investigation is conducted. 4 So starting with there is an 5 overdose, what is the first thing that happens, 6 as far as your team is concerned? 7 A. What kind of an overdose, of 8 somebody that dies or somebody that lives? 9 Q. Well, let's start with somebody who 10 dies. 11 A. Okay. So there would be -- the 12 Cleveland police dispatchers would be notified 13 by a supervisor, a uniformed supervisor, that 14 there was an apparent overdose death that 15 appears to be suspicious, overdose possibly 16 related. 17 They would contact the supervisor 18 that's basically on call to take the 19 information from the dispatcher. He would then 20 contact a detective and have a detective 21 respond either to the death scene or to the 22 hospital, depending on where the body was. 23 Q. And is the person who is on call a 24 member of the HIDI team? 25 A. Yes.</p>
<p style="text-align: right;">Page 167</p> <p>1 underway, when the team was created? 2 A. I can't give you a definitive 3 answer on that. 4 Q. And what is the purpose of the HIDI 5 team? 6 A. To investigate heroin and 7 opioid-related overdoses, deaths, and nonfatal 8 overdoses as well, to try to gather 9 intelligence on the sources of the opioids that 10 people are overdosing and dying from, and to 11 try to investigate back, to make arrests on 12 those people that are involved in the sale of 13 those opioids. 14 Q. What is your success rate in doing 15 that? 16 A. Very low. It is a very difficult 17 case to make. 18 Q. What is your success rate in at 19 least identifying the sources? 20 A. It is a difficult question to 21 answer, because you can identify a source but 22 not have enough information to say that that -- 23 to convict a person. So you might have a name, 24 but you may not be able to say definitively 25 that that's, you know, a person.</p>	<p style="text-align: right;">Page 169</p> <p>1 Q. And then it is a HIDI team 2 detective who is then dispatched out? 3 A. Usually two detectives are 4 dispatched to a fatal overdose. 5 Q. Okay. So they arrive at the scene, 6 and let's say in this case, the person was not 7 transported to the hospital. 8 A. The person was? 9 Q. Was not. 10 A. Was not, okay. 11 Q. So they are wherever they were. 12 A. Okay. So the body is there. 13 Q. The body is there. 14 A. And there is uniform -- there is 15 usually two -- at least two uniform patrol 16 officers and the supervisor, if the supervisor 17 stayed on scene. 18 So then the officers would confer 19 with the uniformed officers, gather some 20 information from them, we would talk to family 21 members or other witnesses that may be on 22 scene, they would observe the scene, and 23 normally we would stand by for the medical 24 examiners and investigators to arrive. 25 We would brief with the medical</p>

<p style="text-align: right;">Page 170</p> <p>1 examiners investigations and work with the  2 medical examiner investigation -- investigators  3 to sort of process the scene, kind of like look  4 for any evidence, recover the evidence, make  5 sure that the evidence is photographed and  6 logged.  7 Then the medical examiner would do  8 their -- would kind of like do what they have  9 to do. They also talk to the family members.  10 They would recover the body, they would call  11 their transport people, they would recover the  12 body, and then that body would be transferred  13 down to the coroner's office.  14 Q. Let me stop you there, because you  15 are now leaving the scene.  16 From the scene, do the uniform  17 officers who were on the scene typically  18 prepare any kind of report?  19 A. Yes.  20 Q. And is there a name for that  21 report?  22 A. Dead body suspected overdose.  23 Q. Dead body suspected overdose.  24 And will there be like one uniform  25 officer, whoever is there will be responsible</p>	<p style="text-align: right;">Page 172</p> <p>1 A. So then that form is forwarded to  2 the commander's office. They use that form to  3 work off of to say, for example, that we  4 recovered suspected opioids on the scene, or  5 the victim's telephone, or the suspect's  6 telephone. The detectives would enter that  7 into evidence. We would use the same record,  8 the LERMS identifying number, you know, so that  9 all the evidence is assigned to the proper  10 case.  11 So on that end, so that's kind of  12 what they would use that form for.  13 Q. Well, the HIDI response form has  14 been filled out by hand. How does that get  15 into LERMS? Does somebody --  16 A. The HIDI response form does not go  17 into LERMS --  18 Q. Oh, okay.  19 THE NOTARY: Wait a minute.  20 THE WITNESS: Here we go. My  21 apologies.  22 A. Let's start over.  23 Q. What happens to the HIDI response  24 form?  25 A. The detectives use that. It is</p>
<p style="text-align: right;">Page 171</p> <p>1 for creating that?  2 A. That's correct.  3 Q. And to whom is that report  4 submitted?  5 A. It goes into the record management  6 system.  7 Q. The record management system?  8 A. Yes.  9 Q. Is that the LERMS?  10 A. LERMS, right. LERMS, L-E-R-M-S.  11 Q. So this is a dead body suspect  12 overdose report that will then go into LERMS?  13 A. Correct.  14 Q. Then the HIDI people, do they -- do  15 they write anything down, do they typically,  16 like, take notes at the scene or anything like  17 that?  18 A. They have a HIDI response form that  19 they complete.  20 Q. And is that something they fill  21 out --  22 A. Correct.  23 Q. -- by hand?  24 A. Yes.  25 Q. And then what happens to that form?</p>	<p style="text-align: right;">Page 173</p> <p>1 basically their piece of information to start  2 their file with, and then they forward that  3 form to the commander's office.  4 Q. And the -- who --  5 A. Commander Gingell.  6 Q. So his office gets the form?  7 A. His office gets that form, and they  8 add that to a database of our victims.  9 Q. And what is the name of that  10 database?  11 A. I don't know, off the top of my  12 head.  13 Q. Is that a database that you have  14 occasion to look at, from time to time?  15 A. Yes.  16 Q. And do you get information  17 extracted from the database?  18 A. I think they keep it, it is  19 one -- I don't think anything is extracted from  20 it. I think they maintain one complete  21 database.  22 Q. But it is something that you have  23 access to?  24 A. I don't have access to change it,  25 but I'm provided the information.</p>

<p style="text-align: right;">Page 174</p> <p>1 Q. You have access to read it?</p> <p>2 A. Right. Correct.</p> <p>3 Q. Is there an activity report that is</p> <p>4 created by somebody in connection with the</p> <p>5 incident?</p> <p>6 A. I'm not sure what kind of activity</p> <p>7 report --</p> <p>8 Q. Excuse me. Or a field report?</p> <p>9 A. That's what the -- that's what the</p> <p>10 uniform officers do on scene.</p> <p>11 Q. Okay. That's their field report?</p> <p>12 A. Right.</p> <p>13 Q. And the field report, would that</p> <p>14 include information they obtain from their view</p> <p>15 of, like, what they see and so on?</p> <p>16 A. The police officers?</p> <p>17 Q. Yes.</p> <p>18 A. Yes.</p> <p>19 Q. Now, how does the -- strike that.</p> <p>20 Again, is that a handwritten thing</p> <p>21 that they originally do?</p> <p>22 A. I think they have transitioned from</p> <p>23 handwritten reports into computer reports. We</p> <p>24 don't do that, so the uniform guys do that, so</p> <p>25 I'm not exactly sure where that process is now,</p>	<p style="text-align: right;">Page 176</p> <p>1 contrary to procedure?</p> <p>2 MS. ZIMMERMANN: Object to form.</p> <p>3 You may answer.</p> <p>4 A. Yes.</p> <p>5 Q. All right. So you have the dead</p> <p>6 body suspect, the field report that's been put</p> <p>7 into the database. Then the HIDI response</p> <p>8 form, which is put into your separate database,</p> <p>9 correct?</p> <p>10 A. Right.</p> <p>11 Q. Does anything from the HIDI team go</p> <p>12 into the LERMS database?</p> <p>13 A. Any evidence that they would</p> <p>14 recover, the HIDI detectives would enter that</p> <p>15 into the LERMS database.</p> <p>16 Q. Would they directly enter it in, or</p> <p>17 would they do an activity report, or something</p> <p>18 that somebody else would enter?</p> <p>19 A. They may -- they may delegate the</p> <p>20 actual entering of it into the computer to</p> <p>21 someone else, but for the most part, they did</p> <p>22 it themselves.</p> <p>23 Q. And so, for example, if they found</p> <p>24 a syringe on the scene, they would enter in</p> <p>25 information about that?</p>
<p style="text-align: right;">Page 175</p> <p>1 so...</p> <p>2 Q. But it used to be done --</p> <p>3 A. It used to be done by hand. I</p> <p>4 think now they are putting everything into a</p> <p>5 computer directly.</p> <p>6 Q. When it was done by hand, how would</p> <p>7 it then get into the computer?</p> <p>8 A. All the reports would be forwarded</p> <p>9 to our reports center, and then the reports</p> <p>10 center would enter everything into the</p> <p>11 computer.</p> <p>12 Q. So there would be people in the</p> <p>13 report --</p> <p>14 A. Right.</p> <p>15 Q. What kind of people were they; were</p> <p>16 they police officers?</p> <p>17 A. No. They were civilians.</p> <p>18 Q. Would they revise the information,</p> <p>19 as they were putting it into the database?</p> <p>20 A. They were not supposed to revise</p> <p>21 everything. Everything is supposed to go in as</p> <p>22 written.</p> <p>23 Q. So if there were differences</p> <p>24 between the original field report and what</p> <p>25 ended up in the database, would that be</p>	<p style="text-align: right;">Page 177</p> <p>1 A. Right.</p> <p>2 Q. If they found a pill bottle, would</p> <p>3 they enter that evidence, enter that in?</p> <p>4 A. It depends, because most of the</p> <p>5 prescriptions on the scenes are recovered by</p> <p>6 the medical examiner's office.</p> <p>7 Q. And then the medical examiners do</p> <p>8 their own reports; is that correct?</p> <p>9 A. Yes.</p> <p>10 Q. Do you or your team get any</p> <p>11 information or data from the medical examiner</p> <p>12 that you put into your own reports?</p> <p>13 A. I don't think they add the medical</p> <p>14 examiner's information into the LERMS reports,</p> <p>15 no.</p> <p>16 Q. So the LERMS reports would only</p> <p>17 reflect -- well, strike that.</p> <p>18 Would any observations made, other</p> <p>19 than evidence, any observations made by the</p> <p>20 HIDI team at the scene end up in the LERMS</p> <p>21 database?</p> <p>22 A. I don't think it would make it into</p> <p>23 the database.</p> <p>24 Q. Their observations would only be in</p> <p>25 your separate ID database, or would it be there</p>

<p style="text-align: right;">Page 178</p> <p>1 either?</p> <p>2 A. It may not be there either. That</p> <p>3 would be part of their working case</p> <p>4 information. So that would be protected, so we</p> <p>5 wouldn't want that out, because the case is</p> <p>6 fresh, and that would not be something that</p> <p>7 they would put into a document that would</p> <p>8 potentially be released to the public.</p> <p>9 Q. Would they document -- would they</p> <p>10 document their observations?</p> <p>11 A. Yes.</p> <p>12 Q. So they would write up some kind of</p> <p>13 report?</p> <p>14 A. Correct.</p> <p>15 Q. And is this the HIDI response form,</p> <p>16 or is that a separate --</p> <p>17 A. That's a separate report.</p> <p>18 Q. And is there a name for that</p> <p>19 report?</p> <p>20 A. We would call it a form 10 or a</p> <p>21 form 1, depending on which, and that would be</p> <p>22 their case -- that would be the document they</p> <p>23 would work their case off of.</p> <p>24 Q. What is the difference between a</p> <p>25 form 10 and the form 1?</p>	<p style="text-align: right;">Page 180</p> <p>1 receive information about a fingerprint that</p> <p>2 may have been discovered, there is information</p> <p>3 about DNA evidence that may have been</p> <p>4 discovered or submitted, any other evidentiary</p> <p>5 items that we may have found, information about</p> <p>6 telephones, documentation about a search</p> <p>7 warrant that may have been not executed on a</p> <p>8 phone, any many number of things involved in</p> <p>9 our investigation.</p> <p>10 Q. If they interview witnesses, would</p> <p>11 there be interviews with the witnesses?</p> <p>12 A. Yes.</p> <p>13 Q. Is there a policy for HIDI team, or</p> <p>14 the narcotics team more generally, that all the</p> <p>15 steps of an investigation are supposed to be</p> <p>16 documented?</p> <p>17 A. I don't think there is a specific</p> <p>18 policy.</p> <p>19 Q. Is that the practice?</p> <p>20 A. Is that the practice --</p> <p>21 Q. The practice of the HIDI team?</p> <p>22 MS. ZIMMERMANN: And it hasn't come</p> <p>23 up, but we are going to object to the extent</p> <p>24 that we get into investigative privilege issues</p> <p>25 or investigative methods, but you may answer</p>
<p style="text-align: right;">Page 179</p> <p>1 A. A form 10 is a document that some</p> <p>2 of the older guys use. It is an actual hard</p> <p>3 document. It was an investigative follow-up</p> <p>4 form. Most of the younger guys don't use it</p> <p>5 anymore, because they don't -- I don't even</p> <p>6 know if the city has that in a digital format.</p> <p>7 Either way, they are provided that</p> <p>8 form to spell out their investigation.</p> <p>9 Q. Are these forms ever, you know,</p> <p>10 provided to the defense, if somebody gets</p> <p>11 arrested and prosecuted?</p> <p>12 A. It would probably be part of</p> <p>13 discovery. The whole case jacket would go</p> <p>14 to -- they would provide the whole case to --</p> <p>15 as part of the grand jury package. So that</p> <p>16 would be sent to the grand jury and the</p> <p>17 prosecutor's office.</p> <p>18 Q. So does each investigator then</p> <p>19 have -- or at least team of investigators for</p> <p>20 each case have a file on that case?</p> <p>21 A. Yes.</p> <p>22 Q. And what else is in that file,</p> <p>23 other than the HIDI response form and the form</p> <p>24 1 or 10?</p> <p>25 A. There is going to be -- if we</p>	<p style="text-align: right;">Page 181</p> <p>1 generally, Lieutenant.</p> <p>2 A. I'm sorry. Could you ask it one</p> <p>3 more time.</p> <p>4 Q. Is it the practice of the HIDI team</p> <p>5 to document all the stages of the</p> <p>6 investigation?</p> <p>7 A. Yes.</p> <p>8 Q. When you investigate an overdose,</p> <p>9 are you always able to determine what the</p> <p>10 person overdosed on?</p> <p>11 A. In terms of what the person</p> <p>12 overdosed on, I guess that would be the role of</p> <p>13 the medical examiner on a fatal, because it's</p> <p>14 possible that they have more than one illegal</p> <p>15 substance or legal substance in their system.</p> <p>16 So I think the medical examiner makes that</p> <p>17 determination.</p> <p>18 And then we have to have, you know,</p> <p>19 lab results back on whatever we may have</p> <p>20 recovered from the scene as well.</p> <p>21 Q. Well, when you are investigating an</p> <p>22 overdose, and you find out they overdosed on</p> <p>23 heroin, for example, I take it your -- one of</p> <p>24 your main charges is to find out where that</p> <p>25 heroin came from; is that correct?</p>

<p style="text-align: right;">Page 182</p> <p>1 A. Yes.</p> <p>2 Q. If they overdosed on prescription</p> <p>3 opioids, do you do anything to try to find out</p> <p>4 where they came from?</p> <p>5 A. Yes.</p> <p>6 Q. And how do you go about that?</p> <p>7 A. The same way we would do if it was</p> <p>8 heroin. I think, obviously, the first thing</p> <p>9 that they would do is to see if a person had a</p> <p>10 legitimate prescription for it, first.</p> <p>11 So when they are recovering the</p> <p>12 prescription bottles in the house, we would</p> <p>13 look to see if there was a script written for</p> <p>14 whatever we believe they overdosed on.</p> <p>15 If not, then if we had received</p> <p>16 information that they overdosed on some</p> <p>17 prescription that they didn't have a legitimate</p> <p>18 reason for, then we would obviously interview</p> <p>19 people, reach out, look in their phone, if we</p> <p>20 had a search warrant for their phone, look in</p> <p>21 the phone to see if the phone, you know,</p> <p>22 divulges, you know, that information, interview</p> <p>23 family, friends, you know, boyfriends, that</p> <p>24 kind of thing.</p> <p>25 Q. Now, if it is a heroin overdose, do</p>	<p style="text-align: right;">Page 184</p> <p>1 A. I really can't answer that with any</p> <p>2 certainty, in all honesty. I don't know how</p> <p>3 far back.</p> <p>4 Q. You used the word "abuse" earlier.</p> <p>5 What do you mean by the term abuse?</p> <p>6 A. Using -- obviously, a person can</p> <p>7 abuse heroin, but they can also abuse a</p> <p>8 prescription medication. So using it beyond</p> <p>9 what the prescriber indicated -- you know,</p> <p>10 intended it for.</p> <p>11 Q. So would you include in that</p> <p>12 somebody who has a prescription for opioids,</p> <p>13 and it says take two pills a day and they take</p> <p>14 four instead?</p> <p>15 A. Yes.</p> <p>16 Q. Have you seen any cases of that, in</p> <p>17 your HIDI investigations?</p> <p>18 A. Yes.</p> <p>19 Q. What proportion of the</p> <p>20 investigations of the HIDI team does -- has</p> <p>21 done, since you have been involved, have</p> <p>22 involved people who overdose on prescription</p> <p>23 opioids?</p> <p>24 A. I don't know that answer.</p> <p>25 Q. Do you know if it's a large</p>
<p style="text-align: right;">Page 183</p> <p>1 you ever -- well, strike that.</p> <p>2 If it is any kind of overdose, do</p> <p>3 you ever go back into the person's medical</p> <p>4 history to see what other things they may have</p> <p>5 been prescribed in the past?</p> <p>6 A. I know that's part of the process,</p> <p>7 and that's part of the process that they work</p> <p>8 on with the medical examiner's office.</p> <p>9 Q. Well, if somebody is a heroin</p> <p>10 overdose, do you look to see if they had a</p> <p>11 prescription for a different opioid earlier?</p> <p>12 A. In their history?</p> <p>13 Q. In their history.</p> <p>14 A. I think if -- I don't know if I can</p> <p>15 answer that, to the extent that I'm -- if the</p> <p>16 investigation would lead us to believe that</p> <p>17 there is an opioid, if they are abusing</p> <p>18 opioids, then we would go down that road. If</p> <p>19 the investigation didn't reveal that, then I</p> <p>20 don't know if they would automatically go down</p> <p>21 that road.</p> <p>22 Q. So let's say you have got a heroin</p> <p>23 overdose, and you have reason to think the</p> <p>24 person is a heroin addict. How far back in</p> <p>25 time do you explore the person's drug usage?</p>	<p style="text-align: right;">Page 185</p> <p>1 percentage, a small percentage?</p> <p>2 A. I don't know the answer.</p> <p>3 Q. Who would know the answer to that?</p> <p>4 A. I don't know if anybody knows the</p> <p>5 answer to that.</p> <p>6 Q. Do you try to keep statistics about</p> <p>7 what percentage of the overdoses are for each</p> <p>8 kind of drug you encounter?</p> <p>9 A. No, ma'am. No.</p> <p>10 Q. Of the overdoses that you have</p> <p>11 encountered that were for prescription opioids,</p> <p>12 what proportion of those, roughly, were for</p> <p>13 people who actually had a prescription for the</p> <p>14 opioid?</p> <p>15 A. I don't know.</p> <p>16 Q. Is it something that is common?</p> <p>17 A. I think it would be common.</p> <p>18 Q. Are any of these suicides or</p> <p>19 potential suicides?</p> <p>20 A. It is possible, yes.</p> <p>21 Q. Do you -- is part of your task</p> <p>22 sometimes to try to figure out whether a</p> <p>23 suicide was involved?</p> <p>24 A. Yes.</p> <p>25 Q. Who makes the final decision about</p>



<p style="text-align: right;">Page 186</p> <p>1 whether it is to be treated as a suicide?</p> <p>2 A. I think it would be the medical</p> <p>3 examiner, but I think they would consult with</p> <p>4 the investigator as well, the HIDI</p> <p>5 investigator.</p> <p>6 Q. When you see statistics from</p> <p>7 Cleveland of overdose deaths, obviously there</p> <p>8 has been a lot of statistics about that out</p> <p>9 there, do those statistics, to your knowledge,</p> <p>10 generally include the suicides or suspected</p> <p>11 suicides?</p> <p>12 MS. ZIMMERMANN: Object to form.</p> <p>13 A. I'm sorry. What did you</p> <p>14 just -- one more time for me.</p> <p>15 Q. When statistics are presented about</p> <p>16 the number of overdose deaths in Cleveland --</p> <p>17 A. Right.</p> <p>18 Q. -- do those statistics generally</p> <p>19 include or exclude suicides or suspected</p> <p>20 suicides?</p> <p>21 A. I don't know.</p> <p>22 MS. ZIMMERMANN: Same objection.</p> <p>23 A. I don't know.</p> <p>24 Q. All right. So is there any other</p> <p>25 documents that are created, other than the ones</p>	<p style="text-align: right;">Page 188</p> <p>1 connection with the HIDI team investigation?</p> <p>2 A. I think the only non-investigative</p> <p>3 files are just the statistics, just the</p> <p>4 numbers, as far as fatal overdoses, nonfatal</p> <p>5 overdoses.</p> <p>6 We also do what is called law</p> <p>7 enforcement aided detox, so that would be</p> <p>8 included in that, and any other statistics that</p> <p>9 the commander may keep that I'm not aware of or</p> <p>10 I just don't see.</p> <p>11 Q. Who creates those statistics?</p> <p>12 A. I would guess it would be the</p> <p>13 commander's assistant, Jennifer DiGregorio.</p> <p>14 Q. So that is something that is -- is</p> <p>15 that done for him?</p> <p>16 A. Yes.</p> <p>17 Q. So it's not done for you?</p> <p>18 A. No.</p> <p>19 Q. Now, we talked about a heroin death</p> <p>20 investigation -- excuse me.</p> <p>21 First of all, it is called a heroin</p> <p>22 investigation, but does that -- is it limited</p> <p>23 to heroin overdoses?</p> <p>24 A. It is not.</p> <p>25 Q. What other types of overdoses are</p>
<p style="text-align: right;">Page 187</p> <p>1 we have already discussed, in connection with</p> <p>2 the HIDI team investigation?</p> <p>3 A. Investigative documents; is that</p> <p>4 what we are talking about?</p> <p>5 Q. Well, let's start with</p> <p>6 investigative documents.</p> <p>7 A. We have talked about the DNA</p> <p>8 evidence, fingerprint evidence, we have</p> <p>9 discussed any search warrants that may be</p> <p>10 involved, so those documents would be there,</p> <p>11 any information that was pulled from either a</p> <p>12 suspect's phone or a victim's telephone, that</p> <p>13 information would be there. Interviews,</p> <p>14 arrests, interviews of arrested people as well.</p> <p>15 That may not be an exhaustive list,</p> <p>16 but that's kind of the list that comes off my</p> <p>17 head.</p> <p>18 Q. Are these records kept in some</p> <p>19 central storage location?</p> <p>20 A. The case documents are kept in the</p> <p>21 narcotics unit, and they have a file system</p> <p>22 there.</p> <p>23 Q. All right. So you've talked about</p> <p>24 investigative files. Are there any</p> <p>25 non-investigative files that are created in</p>	<p style="text-align: right;">Page 189</p> <p>1 included?</p> <p>2 A. All of them, any opioid overdose.</p> <p>3 It kind of started out with heroin, and now it</p> <p>4 is all encompassing with all opioids.</p> <p>5 Q. What about a cocaine overdose?</p> <p>6 A. If we knew that it was a cocaine</p> <p>7 overdose for sure, it would not be part of it,</p> <p>8 but if there was any question, we would go.</p> <p>9 Q. Does anyone -- for other kinds of</p> <p>10 drug overdoses, is there any unit in the police</p> <p>11 department that will do a similar kind of</p> <p>12 investigation?</p> <p>13 A. I'm sorry?</p> <p>14 Q. For any nonopioid overdose.</p> <p>15 A. Overdose?</p> <p>16 Q. Yes.</p> <p>17 A. There would still be a -- a uniform</p> <p>18 officer would handle that. So somebody would</p> <p>19 respond and do an investigation. And then if</p> <p>20 they needed assistance, they would call -- they</p> <p>21 would normally call their vice unit, the local</p> <p>22 vice unit, to help out with that.</p> <p>23 Q. Now, what about a non-death</p> <p>24 overdose, what is different about how that is</p> <p>25 handled?</p>

<p style="text-align: right;">Page 190</p> <p>1 A. So they handle the non-deaths a 2 little differently. Most of the time, the 3 detectives are responding to the hospital. A 4 person has been transported either by private 5 auto or EMS to an emergency room. 6 So the officers would respond to 7 the emergency room. They would ask the person 8 if they would be willing to talk to the 9 officers about what happened, and this, of 10 course, is after, you know, cleared by the 11 medical staff. 12 Our primary mission is to gather 13 information about what happened to the person. 14 Obviously, we want to find out, if they are 15 willing to tell us, who sold them the drugs. 16 We ask information about what you actually 17 thought you were buying and what you ended up 18 buying. 19 You know, we ask information about 20 what did the drugs look like. You know, we 21 just ask them their personal information, if 22 they are willing to give it to us. 23 We ask them for their drug dealer's 24 name, we ask them for the drug dealer's phone 25 number, if they have that. We ask them where</p>	<p style="text-align: right;">Page 192</p> <p>1 share information with other communities and 2 law enforcement agencies that are investigating 3 these kind of drugs. 4 And that's because sometimes the 5 same drug dealer will sell, you know, a fatal 6 overdose load in Cleveland, and they will also 7 sell something bad in Euclid, we may have 8 similar information, so that tries to put the 9 investigators together. 10 Q. Is the information from the fatal 11 overdose entered into Case Explorer? 12 A. Yes. 13 Q. Are field reports created for the 14 nonfatal overdoses? 15 A. Yes. 16 Q. And is information about those also 17 included in a LERMS database? 18 A. Yes. 19 Q. What is the success rate in getting 20 people to go to detox? 21 A. Very few. Probably under ten, 22 under ten people a month. 23 Q. Out of how many? 24 A. Hundreds. 25 Q. Do you have any idea of why that</p>
<p style="text-align: right;">Page 191</p> <p>1 they purchased the drugs, what location in the 2 city that happened. 3 Then we ask them if they are 4 willing to cooperate with the police to try to 5 arrest this person, and, of course, we keep 6 that all confidential, which is really 7 important in what we are talking here. 8 After we are done discussing all 9 that with the person, the last thing our guys 10 do is they ask the overdose victim if they are 11 interested in going to detox. 12 The law enforcement detox program 13 is something my detectives asked for. They 14 wanted to do something to help these people, 15 because they felt like they were leaving them 16 in the hospitals at their most vulnerable 17 point, kind of like unable to do anything. So 18 we were able to get that program started, with 19 the help of the ADAMHS board. 20 So then what they do, if there is 21 any lead that they can work from, they will 22 work from that lead; otherwise, what they do is 23 they take the information that is gathered, and 24 we enter that into the Case Explorer program, 25 which is a HIDTA program that we now use to</p>	<p style="text-align: right;">Page 193</p> <p>1 is? 2 A. My personal opinion is because 3 the -- their addiction is so powerful, and this 4 is from interviewing, you know, many, many 5 people, their addiction is so powerful, and 6 that's why we thought in the hospital would be 7 a good point for us to try to get them into 8 detox, because they are at their most 9 vulnerable point. 10 Many of them are brought back from 11 the dead, their hearts were stopped, they were 12 not breathing. So we thought this would be a 13 good point to try to get them to agree to 14 detox, but the addiction is so powerful, many 15 of them are still unwilling to go. 16 Q. Is your success rate -- what is 17 your success rate in getting cooperation about 18 where they got the stuff? 19 A. I can't give you an exact 20 percentage, but a fair amount of them will give 21 us some level of cooperation. Not all fully 22 cooperate, but at least some level of 23 cooperation. 24 Q. Are you more successful in finding 25 somebody to arrest for those overdoses than for</p>

<p style="text-align: right;">Page 194</p> <p>1 the fatal overdoses?</p> <p>2 A. I think, yes. I think that the</p> <p>3 leads are a little bit -- obviously, we have a</p> <p>4 person to talk to, so the leads come a little</p> <p>5 bit faster.</p> <p>6 Q. Have charges ever been brought, to</p> <p>7 your knowledge, as a result of a HIDI</p> <p>8 investigation against a medical professional</p> <p>9 for writing a prescription?</p> <p>10 A. I don't recall one since I've been</p> <p>11 supervising. It may have happened before me,</p> <p>12 or I may not be aware of one.</p> <p>13 Q. Are you aware of -- strike that.</p> <p>14 The LERMS database, have you</p> <p>15 ever -- start again.</p> <p>16 Have you ever used the LERMS</p> <p>17 database to generate statistics about anything?</p> <p>18 A. I am in no way an expert on LERMS,</p> <p>19 and I deal with it very -- my hands-on</p> <p>20 experience with it is very, very limited.</p> <p>21 Q. Do others who work with you deal</p> <p>22 more with LERMS than you do?</p> <p>23 A. They do, but I don't think any of</p> <p>24 my people are involved in gathering statistics.</p> <p>25 As a matter of fact, I know none of the</p>	<p style="text-align: right;">Page 196</p> <p>1 suspect's name, to see if there was a LERMS</p> <p>2 document or a LERMS entry created.</p> <p>3 Q. And then they would, from that,</p> <p>4 would they -- does the LERMS database include</p> <p>5 the names of the investigating officer?</p> <p>6 A. It would include -- yes, it would</p> <p>7 include the officers that responded, and it</p> <p>8 should include the detective that responded as</p> <p>9 well, as well as the medical examiner that was</p> <p>10 on the scene.</p> <p>11 Q. Now, you said that typically there</p> <p>12 would be one or two -- more often two, I think</p> <p>13 you said, detectives would be sent out to the</p> <p>14 scene?</p> <p>15 A. The scene of a fatal.</p> <p>16 Q. Would those two detectives continue</p> <p>17 with the investigation from then on, or would</p> <p>18 there be others who would also be involved?</p> <p>19 A. Normally, one detective would take</p> <p>20 over the primary role. The other one would be</p> <p>21 the assisting officer. That detective would</p> <p>22 maintain that case file, investigating that</p> <p>23 case.</p> <p>24 If, for example, they were in the</p> <p>25 middle of an investigation or in the middle of</p>
<p style="text-align: right;">Page 195</p> <p>1 detectives and supervisors are involved with</p> <p>2 gathering any statistics from LERMS.</p> <p>3 Q. If somebody in your group wanted to</p> <p>4 look into a prior case, find out, you know,</p> <p>5 what had happened with a prior overdose or</p> <p>6 whether anybody had been arrested or when the</p> <p>7 investigation happened, where would they turn</p> <p>8 to find that information?</p> <p>9 MS. ZIMMERMANN: Object to form.</p> <p>10 THE NOTARY: I didn't hear you.</p> <p>11 Did you say strike that?</p> <p>12 MS. ZIMMERMANN: No, no. I can't</p> <p>13 say that. Object to form, but go ahead answer.</p> <p>14 MS. WINNER: You can say it.</p> <p>15 MS. ZIMMERMANN: Yeah, we say all</p> <p>16 kind of things. I don't know if it has power</p> <p>17 behind it.</p> <p>18 But object to form, I can say, but</p> <p>19 go ahead and answer.</p> <p>20 THE NOTARY: I didn't hear you.</p> <p>21 MS. ZIMMERMANN: Yeah, thank you.</p> <p>22 A. So the first thing they would do is</p> <p>23 that they would use LERMS, and they would</p> <p>24 either -- I would believe that they would</p> <p>25 search by either the victim's name or the</p>	<p style="text-align: right;">Page 197</p> <p>1 actively working that case, and that detective</p> <p>2 had to go on vacation or had a family emergency</p> <p>3 or got sick, the other detective would pick up</p> <p>4 the case and assist him with it, until he came</p> <p>5 back.</p> <p>6 But for the most part, that one</p> <p>7 detective is assigned to the case as a lead.</p> <p>8 Q. Are you familiar with a database</p> <p>9 called ARCOS?</p> <p>10 A. I may have heard it, but I don't</p> <p>11 know if I have ever seen it or used it.</p> <p>12 Q. It's a DEA database?</p> <p>13 A. Right, that's where I've heard it,</p> <p>14 but I don't think I've ever used it.</p> <p>15 Q. Have you ever heard anyone suggest</p> <p>16 that you should use it for something?</p> <p>17 A. I don't recall that.</p> <p>18 Q. How about the OARRS database,</p> <p>19 O-A-A-R-S{sic}?</p> <p>20 A. Well, I don't use -- personally use</p> <p>21 the database, but I know my detectives use it.</p> <p>22 I think we would go to the compliance</p> <p>23 investigators and they had assist us with any</p> <p>24 OARRS information that we would need.</p> <p>25 Q. And what is the OARRS database used</p>

<p style="text-align: right;">Page 198</p> <p>1 for?</p> <p>2 A. It tracks prescriptions, basically.</p> <p>3 I mean, that's my -- that's my interpretation</p> <p>4 of it.</p> <p>5 Q. So why would your detectives use</p> <p>6 it?</p> <p>7 A. If they had information on somebody</p> <p>8 that was maybe abusing opioids or doctor</p> <p>9 shopping or pharmacy shopping type of thing.</p> <p>10 Q. Are you familiar with something</p> <p>11 called the computer-aided dispatch system?</p> <p>12 A. Yes.</p> <p>13 Q. And what is that?</p> <p>14 A. That's like the city's method of</p> <p>15 dispatching calls for service, and it is run</p> <p>16 via computer for the patrol officers, so the</p> <p>17 dispatcher could send them the information from</p> <p>18 her computer into their mobile computer.</p> <p>19 Q. How about the Law Enforcement</p> <p>20 Automated Data System?</p> <p>21 A. Right. LEADS?</p> <p>22 Q. Yes.</p> <p>23 A. Right.</p> <p>24 Q. What is that.</p> <p>25 A. It's a law enforcement database,</p>	<p style="text-align: right;">Page 200</p> <p>1 Gateway?</p> <p>2 A. I don't think I can give you that</p> <p>3 answer. It's one of them I don't know. I have</p> <p>4 heard it, but I can't remember exactly what it</p> <p>5 is for.</p> <p>6 Q. Let me try another one.</p> <p>7 A. Okay.</p> <p>8 Q. The Ohio Incident Based Reporting</p> <p>9 System, O-I-B-R-S?</p> <p>10 A. Yeah. Once again, it's something I</p> <p>11 have heard of. It might be a state-run</p> <p>12 incident reporting system, but it's not</p> <p>13 something that we use.</p> <p>14 Q. So you don't use that one?</p> <p>15 A. Not that I'm aware of.</p> <p>16 Q. How about the Cuyahoga Regional</p> <p>17 Information System, CRIS?</p> <p>18 A. CRIS. We do use it, I don't have a</p> <p>19 lot of exposure to that, but I'm aware that the</p> <p>20 department uses that in some capacity.</p> <p>21 Q. Do you know what it is?</p> <p>22 A. I don't know specifically.</p> <p>23 Q. How about the Regional Enterprise</p> <p>24 Data Sharing System?</p> <p>25 A. REDSS, right?</p>
<p style="text-align: right;">Page 199</p> <p>1 you can run persons to see if they have</p> <p>2 warrants, or you can use LEADS to run BMV</p> <p>3 information on the license plate, that kind of</p> <p>4 information.</p> <p>5 Q. Who maintains that database?</p> <p>6 A. I'm not sure, but I think -- I'm</p> <p>7 not sure if it's a federal-run agency or a</p> <p>8 state run. It is not a City of Cleveland</p> <p>9 database.</p> <p>10 Q. It is something that your</p> <p>11 detectives use?</p> <p>12 A. Yes.</p> <p>13 Q. Is it used -- do they use it for</p> <p>14 anything other than the purposes you just</p> <p>15 described?</p> <p>16 A. It is a general -- general purpose</p> <p>17 law enforcement database. So if you were</p> <p>18 looking for suspects, you would be looking to</p> <p>19 see what a person's background is. So if we</p> <p>20 had a suspect in an overdose that -- in a fatal</p> <p>21 overdose, and we had their name, we may run</p> <p>22 them through LEADS to see if they have prior</p> <p>23 arrests for, you know, selling drugs or violent</p> <p>24 crimes.</p> <p>25 Q. What is the Ohio Law Enforcement</p>	<p style="text-align: right;">Page 201</p> <p>1 Q. R-E-D-S-S.</p> <p>2 A. Once again, I think those are</p> <p>3 databases that we have access to or may have</p> <p>4 access to for background on investigations.</p> <p>5 Q. That's all you know about it?</p> <p>6 A. Yes, ma'am.</p> <p>7 Q. TipSoft?</p> <p>8 A. I've heard of it, can't remember</p> <p>9 what it is for.</p> <p>10 Q. The Ohio Local Law Enforcement</p> <p>11 Information Sharing Network?</p> <p>12 A. I'm not aware of that.</p> <p>13 Q. And then you mentioned Case</p> <p>14 Explorer earlier?</p> <p>15 A. Yes.</p> <p>16 Q. That's something that's run by the</p> <p>17 federal government?</p> <p>18 A. It is run by the HIDTA, right.</p> <p>19 Q. And what kind of information is in</p> <p>20 Case Explorer?</p> <p>21 A. Case Explorer is a method for</p> <p>22 deconfliction and information sharing. So if</p> <p>23 an officer in one jurisdiction is working a</p> <p>24 case, he can plug his basic information into</p> <p>25 that system, and if another officer from a</p>

<p style="text-align: right;">Page 202</p> <p>1 different jurisdiction is working either the 2 same suspect or the same house or connected to 3 the same telephone number, that system will 4 notify each one of those investigators that you 5 need to call Detective Smith, and Detective 6 Smith needs to call Detective Jones to talk 7 about this case. 8 Q. Is that what deconfliction is, what 9 you just -- 10 A. That's part of deconfliction, yes. 11 Q. Is there more to deconfliction? 12 A. There is a basic deconfliction, 13 which is like any drug case, but I think we 14 have refined it a little bit more to focus on 15 the opioid crisis. 16 So Case Explorer has been kind of 17 tweaked, to assist us with what we are dealing 18 with now with all the overdoses. 19 Q. Is Case Explorer used for any 20 purpose other than deconfliction? 21 A. Not that I'm aware of. 22 MS. WINNER: I would like to ask 23 the reporter to mark as Exhibit 3 a document 24 entitled Public Safety Items of Interest. 25 - - - - -</p>	<p style="text-align: right;">Page 204</p> <p>1 Q. Is this a document you ordinarily 2 receive? 3 A. Yes. 4 Q. And do you receive it daily? 5 A. Yes. 6 Q. So you have many others of this? 7 A. I do have some of these, yes. 8 Q. And did you receive it via email? 9 A. Yes. 10 Q. And who did you receive it from? 11 A. I think it gets pushed to all of us 12 from -- I think it's from our dispatch center, 13 but I'm not positive. 14 Q. By "our dispatch center," you 15 mean -- 16 A. The Cleveland Police Dispatch 17 Center. 18 Q. And which of your email addresses 19 is it sent to? 20 A. It is sent to the Cleveland police 21 email. 22 Q. Is there anything of particular 23 significance about this one of these logs? 24 A. This individual items of interest, 25 I saved early, because it was my first Friday</p>
<p style="text-align: right;">Page 203</p> <p>1 (Thereupon, Deposition Exhibit 3, 2 Public Safety Items of Interest, was 3 marked for purposes of 4 identification.) 5 - - - - - 6 Q. Just for the record, this does not 7 have a production number on it, because this 8 was produced to us last night and has not yet 9 been formally produced with the Bates numbers, 10 but we were told this was from your files, at 11 least that's what I understand we were told. I 12 was not the one who was told it. 13 Do you recognize this document? 14 A. I do. 15 Q. And what is it? 16 A. It is a Public Safety Items of 17 Interest log from August 5, 2016. 18 Q. And what is a Public Safety Items 19 of Interest log? 20 A. This is the items of interest that 21 police dispatch, I believe, puts together for 22 incidents that occur during this 24-hour 23 period, and it is pushed to the command staff 24 and anybody that's on their list, basically 25 their email list.</p>	<p style="text-align: right;">Page 205</p> <p>1 covering the heroin squad, and I think there 2 was 15 overdoses that day, which was a 3 significant amount of overdoses, I think, 4 including three fatalities. 5 Q. So this is just something that you 6 have held on to, sort of, as a reminder of that 7 day? 8 A. Yes. 9 Q. And that day sticks out in your 10 memory, I assume? 11 A. It does. 12 Q. Have there been any days as bad as 13 that since then? 14 A. There has been some pretty bad days 15 since then. There have been days with more 16 than three fatal overdoses on them, but this 17 was, once again, I was maybe assigned for three 18 or four days to the heroin squad when this 19 happened, but this is still one of the -- one 20 of my worst days. 21 Q. How many arrests have been made as 22 a result of HIDTA investigations, since you 23 took over? 24 A. I'm sorry. I don't know that 25 answer.</p>



<p style="text-align: right;">Page 206</p> <p>1 Q. Is it more than 20?</p> <p>2 A. I can't accurately answer that</p> <p>3 question. I'm sorry.</p> <p>4 Q. Of the nonfatal overdoses, are the</p> <p>5 victims of those overdoses ever arrested?</p> <p>6 A. Sometimes, but not very frequently.</p> <p>7 Q. And why not?</p> <p>8 A. We are treating them more as</p> <p>9 a -- somebody who is hospitalized as a victim,</p> <p>10 although they did -- many of them did break the</p> <p>11 law when they took the drugs. They are in the</p> <p>12 hospital, for the most part, being treated for</p> <p>13 an overdose incident.</p> <p>14 So as opposed to coming at them</p> <p>15 with a hard fist, law enforcement fist, we are</p> <p>16 trying to help them help themselves, and also</p> <p>17 maybe help the next person, to prevent the next</p> <p>18 person from overdosing, if we can get that</p> <p>19 information from them about who sold, you know,</p> <p>20 the drugs that caused that overdose.</p> <p>21 Q. Have you ever threatened to arrest</p> <p>22 somebody, if they didn't tell you where they</p> <p>23 got the drugs?</p> <p>24 A. I think threaten is a strong word.</p> <p>25 Q. Suggested the possibility.</p>	<p style="text-align: right;">Page 208</p> <p>1 I see kind of an evolution from</p> <p>2 those using opioid prescription pills, leading</p> <p>3 to the heroin, which eventually leads to the</p> <p>4 fentanyl situation.</p> <p>5 Q. Well, there are a lot of people who</p> <p>6 use heroin and never took prescription opioids;</p> <p>7 aren't there?</p> <p>8 MS. ZIMMERMANN: Object to form.</p> <p>9 You may answer.</p> <p>10 A. I don't think in my experience</p> <p>11 that's true. I think my experience says that a</p> <p>12 person that's using heroin is using heroin and</p> <p>13 opioids.</p> <p>14 Q. They are using both?</p> <p>15 A. Heroin and prescription opioids.</p> <p>16 Q. Is that always the case?</p> <p>17 A. I don't know that it is always the</p> <p>18 case, but in my experience, it's quite often</p> <p>19 the case.</p> <p>20 Q. So often somebody who is using one</p> <p>21 is also using the other?</p> <p>22 A. Yes, ma'am.</p> <p>23 Q. And the people who are using both,</p> <p>24 is the prescription opioids they are taking</p> <p>25 typically illicitly obtained prescription</p>
<p style="text-align: right;">Page 207</p> <p>1 A. I think if that ever happened, it</p> <p>2 would be very seldom, because that's not our</p> <p>3 goal. Our goal is not to arrest the overdose</p> <p>4 victim. Our goal is to try to go after the</p> <p>5 individuals that are selling either the deadly</p> <p>6 or overdose, you know, heroin, fentanyl, or</p> <p>7 whatever pill it might be to that person.</p> <p>8 Q. During the time that you have been</p> <p>9 involved with law enforcement in Cleveland, has</p> <p>10 there ever been a time when drug abuse has not</p> <p>11 been a significant problem in Cleveland?</p> <p>12 A. It's always been a problem in</p> <p>13 Cleveland.</p> <p>14 Q. When do you think that -- do you</p> <p>15 believe that Cleveland has a significant</p> <p>16 problem today with prescription opioid abuse?</p> <p>17 A. I still think that prescription</p> <p>18 opioid abuse a significant problem.</p> <p>19 Q. Is it a lesser problem than the</p> <p>20 heroin abuse problem?</p> <p>21 A. I think there is a lot of parallels</p> <p>22 to the heroin and opioid abuse problem. I</p> <p>23 think, if you are asking me, that there is</p> <p>24 almost a transition from the opioid pill into</p> <p>25 the heroin. So that's how I see it.</p>	<p style="text-align: right;">Page 209</p> <p>1 opioids?</p> <p>2 MS. ZIMMERMANN: Object to form.</p> <p>3 You may answer.</p> <p>4 A. I would say the people that we are</p> <p>5 dealing with now are dealing with illicitly</p> <p>6 obtained opioids, as opposed to legally</p> <p>7 obtained opioids.</p> <p>8 Q. How long have you been aware of</p> <p>9 opioids being a problem, a significant problem</p> <p>10 in Cleveland?</p> <p>11 A. Well, I was aware of the pill</p> <p>12 opioid problem, which I've been aware of for</p> <p>13 years, but eventually that transferred into the</p> <p>14 heroin problem, which is causing all these</p> <p>15 fatalities and overdoses so...</p> <p>16 Q. Well, let me break it down. When</p> <p>17 do you think you first became aware of there</p> <p>18 being a significant prescription opioid</p> <p>19 problem?</p> <p>20 A. During my time in the narcotics</p> <p>21 unit is when I really became aware of more of</p> <p>22 the prescription opioid problem. So 2006,</p> <p>23 2007, 2008 maybe.</p> <p>24 Q. And then the heroin problem then</p> <p>25 escalated later than that?</p>

<p style="text-align: right;">Page 210</p> <p>1 A. So it kind of transitioned from 2 cocaine into -- you know, we saw a lot of these 3 pill cases, then we started seeing black tar 4 heroin being introduced in too. 5 We saw a lot of the people that 6 were using the pills started using this black 7 tar heroin, and then eventually, kind of, black 8 tar heroin phased out of our situation. We may 9 see it a little bit. 10 Pretty much now what we see is the 11 brown heroin and the fentanyl-cut heroin. 12 Q. What led to the increase in black 13 tar heroin? 14 A. I think black -- my opinion on that 15 is that black tar heroin was brought here by 16 the cartels, in an effort to exploit what I 17 perceive to be a pill problem in our community. 18 Q. And when was that? 19 A. I think that was around 2008ish, if 20 I remember correctly. 21 Q. Do you believe that the opioid 22 abuse problem in Cleveland has a single cause 23 or multiple causes? 24 A. I got to believe there is probably 25 multiple causes. I don't know what they all</p>	<p style="text-align: right;">Page 212</p> <p>1 opinion, but I think that -- I'm sure that some 2 of them would agree with some of the opinions 3 that I have discussed here today. 4 Q. Do you have reason to think that 5 people disagree with you? 6 A. No, but everybody has their own 7 personal opinion, and maybe they haven't voiced 8 it. We don't talk about why every individual 9 person has become addicted to opioids, but 10 everybody has their own opinion. 11 Q. Going back to the prescription 12 opioid issue that you said -- back when you 13 first became aware of it. 14 Do you think that the department 15 attacked that issue the way it should have at 16 the time? Hindsight is 2020, but with 17 hindsight? 18 A. Well, being part of the narcotics 19 unit, I can say that we didn't turn our back on 20 any case that we could have followed up on. So 21 if we had a lead on either a doctor or somebody 22 that was selling opioids on the street, then we 23 would follow up on it. 24 Q. Have you ever heard of public 25 health or treatment officials report that, in</p>
<p style="text-align: right;">Page 211</p> <p>1 are but... 2 Q. Well, what are the causes that you 3 are aware of? 4 A. Opioid abuse, overprescribing of 5 opioids, on my end of it the -- there would be, 6 you know, people would just maybe be 7 prescribed, or somebody would get injured and 8 maybe have taken opioids, and then, you know, 9 got addicted to them, and then you have people 10 that are just -- is that kind of person that is 11 seeking the pill. 12 Then you have the victim who 13 doesn't understand that an opioid is addictive, 14 and then they just become addicted to it from 15 use. 16 Then there is just the party 17 culture, who they are going to use whatever 18 drugs are available to them, whether it is 19 cocaine, heroin, marijuana, you know, 20 methamphetamine, you have that group of people 21 as well. 22 Q. Do you -- to your knowledge, do 23 other people in the police department view the 24 causes of the problem differently than you do? 25 A. I'm sure everybody has their own</p>	<p style="text-align: right;">Page 213</p> <p>1 their experience, it's rare to see people who 2 have heroin addiction problems who started with 3 legitimate prescriptions for opioid 4 painkillers? 5 MS. ZIMMERMANN: Object to form. 6 You may answer. 7 A. I don't recall that one. 8 Q. You have never heard that? 9 A. I don't recall it. If I heard it, 10 I can't remember everything I hear. 11 Q. You mentioned earlier the term 12 "diversion," and you spoke a little bit earlier 13 about diversion of prescription opiates, so I 14 want to talk a little bit about that. 15 Is diversion part of the problem 16 for prescription opioids? 17 A. I believe it is, yes. 18 Q. And you talked earlier, I think, 19 about some of the kinds of diversions. I think 20 you talked about theft? 21 A. Yes. 22 Q. And sometimes people steal from 23 people they know? 24 A. Correct. 25 Q. Grandmother?</p>

<p style="text-align: right;">Page 214</p> <p>1 A. Correct.</p> <p>2 Q. Sometimes they steal from</p> <p>3 strangers?</p> <p>4 A. Correct.</p> <p>5 Q. Do people steal from pharmacies and</p> <p>6 hospitals?</p> <p>7 A. They do.</p> <p>8 Q. Have you had occasion to</p> <p>9 investigate such incidents?</p> <p>10 A. We have.</p> <p>11 Q. Does diversion occur when somebody</p> <p>12 just gives a pill to a friend?</p> <p>13 A. In a sense, yes.</p> <p>14 Q. Have you ever seen incidents of</p> <p>15 that?</p> <p>16 A. Family members, I think, more often</p> <p>17 than not.</p> <p>18 Q. And then there is something called</p> <p>19 doctor shopping?</p> <p>20 A. Yes.</p> <p>21 Q. What is doctor shopping?</p> <p>22 A. When a person is addicted to</p> <p>23 opioids and maybe they're not getting as many</p> <p>24 as they want, and now that they are addicted,</p> <p>25 they are using more than their prescription, so</p>	<p style="text-align: right;">Page 216</p> <p>1 Q. Have there been problems with pill</p> <p>2 mills in Cleveland?</p> <p>3 A. I don't know if the pill mill, as a</p> <p>4 pain clinic, a big, like, pain building would</p> <p>5 be the issue, but I think pill mill, as far as</p> <p>6 doctors overprescribing or illegally</p> <p>7 prescribing, I think that would be true, yes.</p> <p>8 Q. Have you investigated people for</p> <p>9 that?</p> <p>10 A. I have not directly, but I have</p> <p>11 been part of one.</p> <p>12 Q. Who -- does anybody in the</p> <p>13 Cleveland Police Department have responsibility</p> <p>14 for that?</p> <p>15 A. Detective Prince.</p> <p>16 Q. So that's part of the compliance</p> <p>17 unit?</p> <p>18 A. Yes.</p> <p>19 Q. How many doctors have they</p> <p>20 investigated over the past five to ten years</p> <p>21 for that?</p> <p>22 A. I don't know the exact number, but</p> <p>23 they are consistently investigating.</p> <p>24 Q. Do they -- do you think they have</p> <p>25 made a dent in the problem?</p>
<p style="text-align: right;">Page 215</p> <p>1 now they are going to go to another doctor and</p> <p>2 try to get another prescription or a third</p> <p>3 doctor and try to get a third prescription.</p> <p>4 Q. And have you investigated incidents</p> <p>5 of that?</p> <p>6 A. I don't -- we don't do that very</p> <p>7 much. It would be our compliance people that</p> <p>8 handle those kind of -- we would sometimes</p> <p>9 assist on those, but I have never done one of</p> <p>10 those cases.</p> <p>11 Q. But the compliance group has done</p> <p>12 cases --</p> <p>13 A. Yes.</p> <p>14 Q. -- like that?</p> <p>15 Have you heard the term pill mill?</p> <p>16 A. Yes.</p> <p>17 Q. What is a pill mill?</p> <p>18 A. The way I see it, is most of the</p> <p>19 time it is either a pain management clinic or a</p> <p>20 doctor whose primary way of making money is to</p> <p>21 prescribe large amounts of prescription</p> <p>22 medication. So somebody may go to them, and</p> <p>23 they are walking out with a 90-day supply of,</p> <p>24 you know, Percocet, Soma, and Xanax, when they</p> <p>25 really don't need it.</p>	<p style="text-align: right;">Page 217</p> <p>1 A. I think they have, yes.</p> <p>2 Q. And when do you think that they</p> <p>3 were first able to make a dent in the problem?</p> <p>4 A. I think they have been working</p> <p>5 consistently, since before I came to narcotics</p> <p>6 unit, working that problem, and they continue</p> <p>7 to do it while I was there.</p> <p>8 Q. Have they arrested doctors?</p> <p>9 A. Yes.</p> <p>10 Q. Have the doctors they have arrested</p> <p>11 all been prosecuted?</p> <p>12 A. To that extent, I don't know if</p> <p>13 they all have been prosecuted, but I know they</p> <p>14 have prosecuted doctors.</p> <p>15 Q. Does diversion occur through sales</p> <p>16 over the internet?</p> <p>17 A. I'm sure it can. You are asking me</p> <p>18 my opinion?</p> <p>19 Q. Are you aware of it?</p> <p>20 A. I'm aware that it is happening,</p> <p>21 yes. Have I taken part in any of those</p> <p>22 investigations, no.</p> <p>23 Q. How significant a problem is it?</p> <p>24 A. I don't know.</p> <p>25 Q. Who would know?</p>

<p style="text-align: right;">Page 218</p> <p>1 A. I'm not sure if Detective Prince 2 would know, but he's the expert. He's my 3 expert, so I don't want to throw him under the 4 bus, but I don't know the answer to that 5 question. I'm sorry. It could be maybe the 6 DEA drug diversion group would know that, but I 7 don't.</p> <p>8 Q. So am I right that the compliance 9 group is primarily the ones who are responsible 10 for investigating diversion?</p> <p>11 A. Yes.</p> <p>12 Q. Would that include diversion 13 through theft, or is that broader?</p> <p>14 A. I think it could include it, but 15 I'm not 100 percent positive. The overall 16 theft, if it was just a burglary, I think that 17 would be followed up probably by a bureau 18 detective, but my guess is that they would 19 consult with our compliance people.</p> <p>20 Q. Does diversion occur through 21 forgery of prescriptions?</p> <p>22 A. If we are talking about diverting, 23 illegally diverting prescription medication, I 24 guess that would cover it. If we are getting 25 into the exact definition of diversion, I would</p>	<p style="text-align: right;">Page 220</p> <p>1 pills?</p> <p>2 A. Pills are somehow diverted to them.</p> <p>3 You know, sometimes they have people that are 4 robbing drugstores, sometimes they are stealing 5 those pills, sometimes we don't know where they 6 are getting them. So they come from a variety 7 of locations.</p> <p>8 Q. As a law enforcement officer, do 9 you understand drug diversion to be a crime?</p> <p>10 A. In a sense that those drugs are 11 being wrongfully diverted from the legal method 12 of getting to the patient to the illegal method 13 of getting to somebody who doesn't have a legal 14 right to have them.</p> <p>15 It is not -- I don't know if it is 16 a crime on the books, but what we are talking 17 about are illegal methods of obtaining those 18 drugs.</p> <p>19 Q. Well, if you have a legitimate 20 prescription for an opioid, is it a crime to 21 sell some of your pills to someone else?</p> <p>22 A. Yes.</p> <p>23 Q. If you have -- have you ever 24 arrested anyone for that?</p> <p>25 A. I think we may have done a few</p>
<p style="text-align: right;">Page 219</p> <p>1 think that would be part of it, in a broader 2 essence, yes.</p> <p>3 Q. I'm not trying to trap you with a 4 definition. Is that a problem?</p> <p>5 A. Yes, it is a problem.</p> <p>6 Q. How common is it?</p> <p>7 A. I know they work it all the time, 8 and I know that some of the doctors, hospitals 9 have been trying to educate their staff on how 10 to prevent it and how to prevent people from 11 getting the prescription -- the old 12 prescription books, and that may have gone by 13 the wayside, as far as I know, because I don't 14 deal with it all the time.</p> <p>15 Q. Who deals with the forged 16 prescriptions?</p> <p>17 A. Detective Prince and Patina.</p> <p>18 Q. So, basically, you have got two 19 people who are looking at all of these areas?</p> <p>20 A. Correct.</p> <p>21 Q. When -- you talked earlier about 22 drug dealers who offer multiple offerings, 23 heroin and maybe cocaine and maybe also some 24 pills. Where do they generally get their 25 pills -- or how do they generally get their</p>	<p style="text-align: right;">Page 221</p> <p>1 cases like that, yes.</p> <p>2 Q. If you have a legitimate 3 prescription for an opioid, is it a crime to 4 give some of it away to someone else?</p> <p>5 A. Yes.</p> <p>6 Q. Have you ever arrested anyone for 7 that?</p> <p>8 A. We may have. I can't give you a 9 specific instance whether the person sold or 10 gave. I don't recall specifically somebody who 11 just gave a couple of pills to somebody and we 12 arrested them for that.</p> <p>13 Q. Is it a crime to steal opioid pills 14 from a relative or a friend?</p> <p>15 A. Yes.</p> <p>16 Q. Is there any situation which 17 stealing opioids is not a crime, that you can 18 think of?</p> <p>19 A. If a person stole opioids from 20 somebody who is abusing them, to prevent them 21 from hurting themselves or harming themselves, 22 I would say that would not be a crime. So if 23 they, like, have an altruistic reason for doing 24 what they did. I could see that.</p> <p>25 But, you know, they are trying to</p>

<p style="text-align: right;">Page 222</p> <p>1 protect one of their loved ones, that kind of a 2 case. Not using those prescription pills, they 3 are not giving them to somebody else. They may 4 just toss them down the toilet, throw them 5 away. 6 Q. If you steal opioids in order to 7 use them or to sell them to somebody else, is 8 that ever not a crime? 9 A. So use them for yourself, I don't 10 think so. 11 Q. Is it a crime to obtain a 12 prescription for opioids from a pill mill, when 13 you know you don't really need it? 14 A. Is it a crime; I would think it 15 would be a crime. 16 Q. Is it a crime to obtain an opioid 17 prescription from a doctor for the purpose of 18 selling the pills to someone else? 19 A. Yes. 20 Q. Is it a crime for a street dealer 21 or anyone else who isn't a registered pharmacy 22 to sell prescription opioids? 23 A. Yes. 24 Q. Is it a crime to forge a 25 prescription for a controlled substance?</p>	<p style="text-align: right;">Page 224</p> <p>1 that have been maintained on the amount of 2 diversion in Cleveland? 3 A. I'm not aware, ma'am. 4 Q. Are you aware of any -- well, 5 strike that. 6 Are you aware of any diversion 7 occurring outside Cleveland that has had an 8 impact within the city? 9 A. I don't specifically have that 10 information, no. I mean, are we talking about 11 diversion investigations, are we talking about, 12 like, illegal diversions that are -- 13 Q. Illegal diversions. 14 A. And I don't know the answer to that 15 question. 16 MS. ZIMMERMANN: I think we are 17 going to take a ten-minute break. 18 MS. WINNER: Hold on just a second. 19 I think that will probably be fine. Yes, 20 that's fine. 21 THE VIDEOGRAPHER: Off the record 22 at 2:39. 23 (Recess taken.) 24 THE VIDEOGRAPHER: On the record, 25 2:56.</p>
<p style="text-align: right;">Page 223</p> <p>1 A. Yes. 2 Q. Is it a crime to obtain 3 prescriptions that are paid for by Medicaid and 4 diverting all or part of the prescription? 5 A. Yes. 6 Q. Is it a crime for a doctor to write 7 a prescription for an opioid, knowing that it 8 will not be used for a legitimate medical 9 purpose? 10 A. Yes. 11 Q. Is it a crime for a pharmacy to 12 dispense an opioid without a proper 13 prescription? 14 A. I hope so. 15 Q. You don't know about that one? 16 A. I'm not positive, but I'm sure it 17 is, yes. 18 Q. Give me a second. I don't want to 19 ask you a question I have already asked you. 20 A. Okay. 21 Q. Has the amount of opioid diversion 22 in Cleveland changed over time? 23 A. I don't think I can answer that 24 question. 25 Q. Are you aware of any statistics</p>	<p style="text-align: right;">Page 225</p> <p>1 Q. We were talking before the break, 2 we were talking about diversion. 3 A. If you don't mind, I have just one 4 correction I wanted to make. 5 Q. Please, go ahead. 6 A. We were going through all the law 7 enforcement databases, and one of the ones you 8 were mentioning was the Ohio Law Enforcement 9 Gateway. 10 Q. Yes. 11 A. We use that all the time. I don't 12 know why, when you read it -- because we call 13 it OLEG, we don't say the whole name. So we 14 use OLEG all the time. It's a database that we 15 use. Every single day my detectives use that 16 Gateway, and it is also -- it also will 17 provide, like, photographs of people's, like, 18 driver's license, so we can use those pictures 19 as well. 20 So I just wanted to let you know we 21 have access to that. 22 Q. What is that database, what's in 23 that database? 24 A. Basically driver's license 25 information, any local -- if like a person was</p>



<p style="text-align: right;">Page 226</p> <p>1 convicted of traffic offense or minor 2 misdemeanor offenses, that would be part of 3 that as well, and it would give us, like, all 4 the updated photographs that somebody would 5 have on file from their BMV photos, their 6 Bureau of Motor Vehicles. 7 Q. So do they use it mostly for 8 photos? 9 A. They use it for photos, for 10 identification, because it will also give 11 addresses and prior addresses for people. So I 12 want to hit me on my OLEG. 13 Q. These acronyms can be difficult 14 sometimes. 15 A. Right. 16 Q. I wanted to go back to ask you a 17 couple of questions about pill mills. 18 A. Okay. 19 Q. I just want to make sure I'm clear. 20 Were there any pill mills in Cleveland that you 21 are aware of, over the past however many years 22 that you have been involved in narcotics 23 enforcement? 24 A. I guess I would ask you for a 25 clarification. When you ask about pill mills,</p>	<p style="text-align: right;">Page 228</p> <p>1 As I think of it, it could be just one doctor 2 or it could be a whole -- a group of doctors. 3 Q. Well, has there ever been a 4 physical location with more than one doctor as 5 a pill mill? 6 A. I'm sure there has. I know that 7 they have investigated more than one doctor, 8 but I have not been involved in those cases. 9 Q. Who has been involved in those 10 cases? 11 A. Detective Prince. 12 Q. Has investigating pill mills ever 13 been a priority for the narcotics unit? 14 A. Investigating, there was a period 15 of time when we spent a large -- many hours 16 investigating pill mills, or doctors that were 17 overprescribing or illegally prescribing. 18 Q. When that was? 19 A. It was probably during that 20 2008-2009 period. 21 Q. Did the narcotics unit ever make 22 efforts to get the medical board to pull 23 doctors' licenses who were overprescribing 24 opioids? 25 A. Once again, I was not directly</p>
<p style="text-align: right;">Page 227</p> <p>1 are we talking about a large physical 2 structure, or exactly what do you mean by pill 3 mill? 4 Q. Well, how do you -- what do you 5 understand the term pill mill to mean? 6 A. That's what I'm trying to clarify 7 what you mean. So as far as I'm concerned, a 8 pill mill could be a -- it could be more than 9 one thing. 10 It could be a doctor, a single 11 doctor that is churning out prescription after 12 prescription after prescription, or it could be 13 a pain management clinic that has more than one 14 participant and doing basically the same thing, 15 but more than one person. 16 So I would guess -- I would say 17 that my definition of a pill mill, it's not 18 narrowly defined as a big pain management 19 clinic with multiple, you know, doctors, you 20 know, prescribing. It could be just one doctor 21 just churning out prescriptions. 22 Q. Has the term been used in the 23 course of your work to refer to just one 24 doctor? 25 A. And that's where I'm coming from.</p>	<p style="text-align: right;">Page 229</p> <p>1 involved in those cases, but I am aware of that 2 happening, yes. 3 Q. How many times did that happen? 4 A. I can't give you a specific number. 5 Q. Do you know if the medical board 6 went along and agreed to pull licenses? 7 A. I'm aware of at least one case, and 8 I don't know the doctor's name, but I'm aware 9 of at least one case. 10 Q. Do you know of any cases where they 11 refused? 12 A. I don't. 13 Q. Have there been situations in which 14 the Cleveland Police Department has been aware 15 of pharmacies that were acting improperly in 16 dispensing? 17 A. I'm not aware of those cases. 18 MS. ZIMMERMANN: Object to form. 19 Go ahead. 20 A. I'm not aware of those cases. 21 Q. Are you aware of there being any 22 cases? 23 A. I'm not aware of. 24 Q. Do you know, as you sit here today, 25 whether any pharmacy has ever acted improperly</p>

<p style="text-align: right;">Page 230</p> <p>1 in dispensing opioids in Cleveland?</p> <p>2 MS. ZIMMERMANN: Same objection.</p> <p>3 A. I'm not aware.</p> <p>4 MS. WINNER: I would like to ask</p> <p>5 the court reporter to mark as Exhibit 4 an</p> <p>6 email from Alexis Butler to Michael Connelly,</p> <p>7 with an email string below it.</p> <p>8 - - - - -</p> <p>9 (Thereupon, Deposition Exhibit 4, An</p> <p>10 Email From Alexis Butler to Michael</p> <p>11 Connelly, With an Email String Below</p> <p>12 It, Beginning with Bates Label CLEVE</p> <p>13 1476407, was marked for purposes of</p> <p>14 identification.)</p> <p>15 - - - - -</p> <p>16 Q. Just take a moment to look at this,</p> <p>17 sir, and then my first question is whether you</p> <p>18 recognize this?</p> <p>19 A. I do.</p> <p>20 Q. And what is it?</p> <p>21 A. It is an email from one of my</p> <p>22 daughter's friends, who was doing a project for</p> <p>23 school, and she wanted to ask me some</p> <p>24 questions.</p> <p>25 Q. And was the daughter's friend</p>	<p style="text-align: right;">Page 232</p> <p>1 Q. Did you do any research or anything</p> <p>2 before answering this question, or was this</p> <p>3 just what you came up with, off the top of your</p> <p>4 head?</p> <p>5 MS. ZIMMERMANN: Object to form.</p> <p>6 You may answer, Lieutenant.</p> <p>7 A. This is my answer based on my</p> <p>8 experience.</p> <p>9 Q. Did you consult any statistics?</p> <p>10 A. I did not.</p> <p>11 Q. Are you aware of any statistics,</p> <p>12 bearing on this question?</p> <p>13 A. This is just my answer based on my</p> <p>14 experience. I did not gather any statistics.</p> <p>15 Q. Have you ever gathered any</p> <p>16 statistics on that subject?</p> <p>17 A. Besides interviewing people, no.</p> <p>18 Q. Well, did you perform interviews, a</p> <p>19 scientific study of some kind to develop an</p> <p>20 answer to this question?</p> <p>21 MS. ZIMMERMANN: Object to form.</p> <p>22 A. This is based on my experience.</p> <p>23 Q. And that's all it is based on?</p> <p>24 A. That's correct. My experience and,</p> <p>25 as I stated earlier, I have been to hundreds of</p>
<p style="text-align: right;">Page 231</p> <p>1 Alexis Butler?</p> <p>2 A. That's correct.</p> <p>3 Q. And the questions she was asking</p> <p>4 you about were about opioids in Cleveland,</p> <p>5 correct?</p> <p>6 A. Correct.</p> <p>7 Q. And the questions she asked you are</p> <p>8 in the email that is at the end of this string,</p> <p>9 that's at the bottom of the string, correct?</p> <p>10 A. Right.</p> <p>11 Q. And then the middle email is your</p> <p>12 answers to those questions, correct?</p> <p>13 A. Okay. Yeah. Yes, that's correct.</p> <p>14 Q. And you start off by saying that</p> <p>15 you are in charge of the Heroin Involved Death</p> <p>16 Investigations in the City of Cleveland.</p> <p>17 That's the HIDI team?</p> <p>18 A. Correct.</p> <p>19 Q. The number 3, her question was, "In</p> <p>20 your opinion, what is the root cause of why</p> <p>21 people use heroin"; do you see that?</p> <p>22 A. Uh-huh.</p> <p>23 Q. And then you provide your answer in</p> <p>24 number 3, correct?</p> <p>25 A. That's correct.</p>	<p style="text-align: right;">Page 233</p> <p>1 overdose scenes.</p> <p>2 Q. But you haven't -- well, strike</p> <p>3 that.</p> <p>4 For overdose incidents that you</p> <p>5 have participated in, you don't always know the</p> <p>6 medical history of the people, correct?</p> <p>7 A. Their medical history?</p> <p>8 Q. Yes.</p> <p>9 A. Do I always know their medical</p> <p>10 history?</p> <p>11 Q. Yes.</p> <p>12 A. No.</p> <p>13 Q. In fact, you often don't know their</p> <p>14 medical history; isn't that correct?</p> <p>15 A. Are you talking about their</p> <p>16 complete medical history?</p> <p>17 Q. Yes.</p> <p>18 A. I wouldn't say I would know their</p> <p>19 complete medical history.</p> <p>20 Q. Well, for the overdose deaths, you</p> <p>21 often do not know -- let me start that again.</p> <p>22 For a heroin overdose, a</p> <p>23 heroin-fentanyl overdose, for example, you</p> <p>24 often do not know exactly what originally got</p> <p>25 them started using heroin, correct?</p>

<p style="text-align: right;">Page 234</p> <p>1 MS. ZIMMERMANN: Object to form.</p> <p>2 A. I think that was incorrect. I</p> <p>3 think that, during our interviews, we often ask</p> <p>4 them why they got started. So that's</p> <p>5 why -- that's how I gained the experience or my</p> <p>6 knowledge, based on this -- to answer this</p> <p>7 question.</p> <p>8 Q. So I take it you are not talking</p> <p>9 about the people who died of overdoses?</p> <p>10 A. Exactly.</p> <p>11 Q. So you don't -- for those people,</p> <p>12 you generally don't know what got them started,</p> <p>13 do you?</p> <p>14 A. Unless during the interview process</p> <p>15 we discover that.</p> <p>16 Q. But often you don't discover it,</p> <p>17 correct?</p> <p>18 A. I think "often" is not the correct</p> <p>19 language I would use. I would say that --</p> <p>20 Q. What percentage of the time do you</p> <p>21 know what got the person started on heroin, if</p> <p>22 they've overdosed and died?</p> <p>23 A. I can't give you the exact</p> <p>24 percentage, but it's quite often that we</p> <p>25 discover why they started using opioids.</p>	<p style="text-align: right;">Page 236</p> <p>1 Q. So there are other reasons, in</p> <p>2 addition to the ones you listed here, correct?</p> <p>3 A. There could be.</p> <p>4 Q. And the first is, "Party lifestyle,</p> <p>5 alcohol, marijuana and other drug use"; do you</p> <p>6 see that?</p> <p>7 A. Yes.</p> <p>8 Q. And you referred to that earlier?</p> <p>9 A. Correct.</p> <p>10 Q. And do you know -- do you have any</p> <p>11 specific detailed information as to what</p> <p>12 percentage of people that begin to use heroin</p> <p>13 fall into that category?</p> <p>14 A. I do not.</p> <p>15 Q. Is there a difference between</p> <p>16 category B and category C, as you have listed</p> <p>17 it in here?</p> <p>18 A. Yes.</p> <p>19 Q. And what's the difference between</p> <p>20 the two?</p> <p>21 A. Category B is somebody that was</p> <p>22 prescribed an opioid and became addicted while</p> <p>23 being prescribed it legally.</p> <p>24 Q. Legally, correct?</p> <p>25 A. Correct. Category C would be</p>
<p style="text-align: right;">Page 235</p> <p>1 Q. What does "quite often" mean?</p> <p>2 A. It's frequent. That's the only</p> <p>3 answer I can give you. We frequently</p> <p>4 understand why the person is abusing opioids or</p> <p>5 how they became addicted to the opioids.</p> <p>6 Q. Does anyone in the Cleveland Police</p> <p>7 Department have a specific statistic as to how</p> <p>8 many people -- what percentage of the</p> <p>9 population of overdoses, for whom you are able</p> <p>10 to determine what started them on drugs?</p> <p>11 MS. ZIMMERMANN: Object to form.</p> <p>12 A. I don't know if they keep those</p> <p>13 records.</p> <p>14 Q. Have you ever seen any such</p> <p>15 records?</p> <p>16 A. No, ma'am.</p> <p>17 Q. You identified -- you said there</p> <p>18 are many different reasons why a person begins</p> <p>19 to use heroin, and then you offer A, B and C,</p> <p>20 correct?</p> <p>21 A. That's correct.</p> <p>22 Q. Is this intended to be an</p> <p>23 exhaustive list, or were you just giving some</p> <p>24 examples?</p> <p>25 A. I was giving some examples.</p>	<p style="text-align: right;">Page 237</p> <p>1 somebody that is taking opioids obtained by</p> <p>2 other means than legally, that under a false</p> <p>3 belief that it is safe to use these -- this</p> <p>4 medicine, because it's a prescription</p> <p>5 medication, that they believe that it is safe</p> <p>6 to use.</p> <p>7 Q. So this could be somebody who stole</p> <p>8 it from their grandmother and thought it would</p> <p>9 be safe to use it?</p> <p>10 A. Correct.</p> <p>11 Q. The paragraph 4 of your email, you</p> <p>12 say that, "The primary reason the deaths were</p> <p>13 on the rise," you said, "They have leveled off</p> <p>14 and have actually dropped in the last few</p> <p>15 months, is the drug fentanyl." Do you still</p> <p>16 believe that was an accurate statement?</p> <p>17 A. The reason why they have risen?</p> <p>18 Q. Pardon?</p> <p>19 A. The reason why the deaths have</p> <p>20 risen was because of the drug fentanyl?</p> <p>21 Q. Yes.</p> <p>22 A. Yes.</p> <p>23 Q. And going back to number 3, I</p> <p>24 should have asked you this question before.</p> <p>25 I take it you would agree that not</p>

<p style="text-align: right;">Page 238</p> <p>1 everyone who gets a prescription for a 2 prescription opioid becomes addicted? 3 A. Yes. 4 Q. In fact, the majority of the people 5 who get prescription opioids do not become 6 directed, correct? 7 MS. ZIMMERMANN: Object to form. 8 A. I don't know the numbers, but I 9 would assume, yes. 10 Q. And the majority of people who get 11 legitimate prescriptions of opioids do not go 12 on to use heroin, correct? 13 A. I'm sorry? 14 Q. The majority of people who get 15 legitimate prescriptions of opioids do not go 16 on to use heroin? 17 MS. ZIMMERMANN: Object to form. 18 A. I don't know the statistics, but 19 that would be my belief. 20 Q. In paragraph 6, for number 6, you 21 say, "The reasons for heroin use are many," and 22 then the last sentence -- well, strike that. 23 You say, "It is clear there is 24 heavier heroin use in the lower income white 25 communities. The social economically</p>	<p style="text-align: right;">Page 240</p> <p>1 children whose parents abuse alcohol and drugs 2 are more likely to abuse heroin? 3 A. I don't know exactly why but, in my 4 experience, it seems to be that way. 5 Q. Now, am I correct that some of the 6 particularly unfortunate death investigations 7 you have had to deal with have involved 8 children? 9 A. The children as victims? 10 Q. Yes. 11 A. There are a few children, but I 12 think they would be either young adults or 13 older teenagers. 14 Q. Have you -- you haven't had 15 overdose investigations that have involved 16 younger children? 17 A. I have not individually, no. 18 Q. Has your team had those? 19 A. Where a child has overdosed? I 20 don't recall that. 21 Q. If a young child were to overdose, 22 would you expect that to be the causes other 23 than that child's previously having used a 24 prescription opioid? 25 MS. ZIMMERMANN: Object to form.</p>
<p style="text-align: right;">Page 239</p> <p>1 disadvantaged seem to have a higher rate of 2 drug and alcohol abuse. Everything is an 3 individual choice, but children whose parents 4 abuse alcohol and drugs are much more likely to 5 abuse heroin"; do you see that? 6 A. Yes. 7 Q. Do you still believe that to be 8 correct? 9 A. I do. 10 Q. And what was your basis for that? 11 MS. ZIMMERMANN: Object to form. 12 A. Just my experience dealing with 13 these people that are overdosing. 14 Q. Do they tend to be from the lower 15 income white communities? 16 A. Yes. 17 Q. And from your perspective, you 18 believe that everything was an individual 19 choice? 20 A. Everything -- let me read it again. 21 Q. The last sentence of paragraph 6. 22 A. People have to make their choice of 23 what they are doing, correct. I'm not sure 24 where we're going with that one. 25 Q. Do you have an understanding of why</p>	<p style="text-align: right;">Page 241</p> <p>1 A. Could you please, you know, give me 2 that one more time. 3 Q. If a young child were to overdose, 4 would the causes of that likely to be something 5 other than the child having previously used 6 prescription opioids? 7 MS. ZIMMERMANN: Object to form. 8 A. That would -- I guess, if the child 9 intentionally overdosed or -- I mean, there is 10 so many reasons why a child could possibly 11 overdose. It could be completely accidental, 12 so it may not have anything to do with opioid 13 use at all. 14 Q. During the periods when you have 15 headed up a team, what proportion of the 16 overdoses have involved cocaine? 17 A. I don't know the numbers, but the 18 number has increased. 19 Q. And those generally have been 20 people who were completely unaware that they 21 were taking an opioid, correct? 22 MS. ZIMMERMANN: Object to form. 23 You may answer, Lieutenant. 24 THE WITNESS: Pardon me? 25 MS. ZIMMERMANN: You may answer,</p>

<p style="text-align: right;">Page 242</p> <p>1 Lieutenant.</p> <p>2 A. Could you restate that question,</p> <p>3 please.</p> <p>4 Q. Those people, by and large, were</p> <p>5 unaware that they were taking an opioid at all,</p> <p>6 correct?</p> <p>7 A. I think it is difficult for me to</p> <p>8 answer that question, because in a case of the</p> <p>9 fatalities, we are not 100 percent sure, but</p> <p>10 certainly in the most recent history, some of</p> <p>11 them are aware that there was fentanyl or</p> <p>12 opioids in their cocaine.</p> <p>13 So, I mean, it's hard for me to</p> <p>14 answer that question definitively, the way you</p> <p>15 are asking it.</p> <p>16 Q. So you think some people know and</p> <p>17 some people don't?</p> <p>18 A. Yes.</p> <p>19 Q. Prescription opioids do not lead</p> <p>20 people, in your experience, to take cocaine, do</p> <p>21 they?</p> <p>22 A. It's possible. All these drugs,</p> <p>23 when you start abusing them, some people will</p> <p>24 take whatever they can get to make themselves</p> <p>25 feel better. So if they can't get opioids,</p>	<p style="text-align: right;">Page 244</p> <p>1 Q. Just following up on a question I</p> <p>2 asked you earlier about pharmacies, have you</p> <p>3 ever received any information to suggest that a</p> <p>4 pharmacy was dispensing more opioids than it</p> <p>5 should have?</p> <p>6 A. I have not.</p> <p>7 Q. Do you know whether anybody else in</p> <p>8 the department has?</p> <p>9 A. I don't.</p> <p>10 Q. Is there any unit within the</p> <p>11 department that has the responsibility for</p> <p>12 investigating that subject?</p> <p>13 A. The diversion.</p> <p>14 Q. So if anybody looked at that, it</p> <p>15 would be them?</p> <p>16 A. Correct, within the Cleveland</p> <p>17 Police Department.</p> <p>18 Q. Has your department encountered</p> <p>19 counterfeit pills that were sold as</p> <p>20 prescription opioids but were actually</p> <p>21 something else?</p> <p>22 A. Yes.</p> <p>23 Q. And when did you start seeing that?</p> <p>24 A. Maybe five years ago.</p> <p>25 Q. And what were the pills sold as?</p>
<p style="text-align: right;">Page 243</p> <p>1 they will take cocaine or they will take a</p> <p>2 Xanax or they will take something else that</p> <p>3 will help them feel better.</p> <p>4 Q. Is that -- do you have concrete</p> <p>5 evidence of that, or is that just --</p> <p>6 A. No.</p> <p>7 Q. -- your impression?</p> <p>8 A. Absolutely.</p> <p>9 Q. And what is your evidence of that?</p> <p>10 A. By interviewing the victims of</p> <p>11 opioid abuse.</p> <p>12 Q. And have people specifically told</p> <p>13 you, "I took cocaine because I used to take</p> <p>14 prescription opioids and I can't get them"?</p> <p>15 A. Yes.</p> <p>16 Q. How many people have told you that?</p> <p>17 A. I can't give you that number. I</p> <p>18 don't know that number.</p> <p>19 Q. Have you seen any statistics about</p> <p>20 that?</p> <p>21 A. I have not.</p> <p>22 Q. Have you seen any kind of</p> <p>23 scientific evidence that has been generated on</p> <p>24 that subject?</p> <p>25 A. I have not.</p>	<p style="text-align: right;">Page 245</p> <p>1 A. Percocet or oxycodone or OxyContin.</p> <p>2 Q. What were they actually?</p> <p>3 A. Heroin or fentanyl-heroin.</p> <p>4 Q. Has that been a cause of overdoses?</p> <p>5 A. Yes.</p> <p>6 Q. Has it been a significant cause of</p> <p>7 overdoses?</p> <p>8 A. No.</p> <p>9 Q. Has the problem continued, or is it</p> <p>10 something you just saw a blip of, and it went</p> <p>11 away?</p> <p>12 A. We continue to see it. Not as</p> <p>13 often as heroin, but we still continue to see</p> <p>14 it.</p> <p>15 Q. In the course of your work and your</p> <p>16 department's work that you are aware of dealing</p> <p>17 with opioid issues, have you ever done anything</p> <p>18 where you have come across the name of</p> <p>19 Allergan?</p> <p>20 A. I don't recall that name.</p> <p>21 Q. How about a company called Discount</p> <p>22 Drug Mart?</p> <p>23 A. I've heard of Discount Drug Mart,</p> <p>24 but I don't recall any cases involving them.</p> <p>25 Q. How about Cardinal Health?</p>



<p style="text-align: right;">Page 246</p> <p>1 A. No.</p> <p>2 Q. Target?</p> <p>3 A. No.</p> <p>4 Q. Walmart?</p> <p>5 A. No.</p> <p>6 Q. Pfizer?</p> <p>7 A. No.</p> <p>8 Q. AmerisourceBergen?</p> <p>9 A. No.</p> <p>10 Q. Never even heard of them?</p> <p>11 A. No.</p> <p>12 Q. How about Johnson &amp; Johnson or</p> <p>13 Janssen?</p> <p>14 A. No.</p> <p>15 Q. McKesson?</p> <p>16 A. No.</p> <p>17 Q. Have you ever heard of them?</p> <p>18 A. Not off the top of my head, no.</p> <p>19 Q. H.D. Smith?</p> <p>20 A. No.</p> <p>21 Q. Walgreens?</p> <p>22 A. No.</p> <p>23 Q. You have heard of them?</p> <p>24 A. I have heard of them, but I don't</p> <p>25 recall any investigations directly involving</p>	<p style="text-align: right;">Page 248</p> <p>1 Q. Have you ever been involved in any</p> <p>2 discussions about whether something like that</p> <p>3 should be done?</p> <p>4 A. Not that I recall.</p> <p>5 Q. So you're not aware of the subject</p> <p>6 ever coming up?</p> <p>7 A. I'm not normally involved in those</p> <p>8 discussions, so that's not part of what I</p> <p>9 normally would do.</p> <p>10 Q. Who would be involved in any</p> <p>11 discussions about that, if there had been any?</p> <p>12 A. The diversion investigators,</p> <p>13 possibly the commander.</p> <p>14 Q. Do you know whether any</p> <p>15 consideration was ever given to contacting any</p> <p>16 manufacturer of prescription opioids to discuss</p> <p>17 the problem with them?</p> <p>18 A. Not that I'm aware of.</p> <p>19 Q. Does the Cleveland Police</p> <p>20 Department attempt to develop any kind of</p> <p>21 reliable statistics on where all the opioids</p> <p>22 you encounter come from?</p> <p>23 MS. ZIMMERMANN: Object to form.</p> <p>24 A. I'm not aware of that.</p> <p>25 Q. Is that something that HIDTA tries</p>
<p style="text-align: right;">Page 247</p> <p>1 those.</p> <p>2 Q. How about CVS?</p> <p>3 A. No.</p> <p>4 Q. Mallinckrodt?</p> <p>5 A. No.</p> <p>6 Q. Rite Aid?</p> <p>7 A. No.</p> <p>8 Q. Endo?</p> <p>9 A. No.</p> <p>10 Q. Anda?</p> <p>11 A. No.</p> <p>12 Q. I'm almost done.</p> <p>13 A. Okay.</p> <p>14 Q. Teva?</p> <p>15 A. No.</p> <p>16 Q. Prescription Supply, Inc.?</p> <p>17 A. No.</p> <p>18 Q. Have you heard of that one?</p> <p>19 A. I have not.</p> <p>20 Q. I think I'm missing somebody, but</p> <p>21 that's good enough.</p> <p>22 Did you ever contact any</p> <p>23 distributor of prescription opiates to discuss</p> <p>24 the problem, the opiate problem with them?</p> <p>25 A. I have not.</p>	<p style="text-align: right;">Page 249</p> <p>1 to do?</p> <p>2 A. Once again, I don't know the answer</p> <p>3 to that question.</p> <p>4 Q. Does the department separately</p> <p>5 track arrests that are associated with</p> <p>6 different kinds of opioids?</p> <p>7 A. I'm not aware of that either.</p> <p>8 Q. Do you know if -- does your task</p> <p>9 force do that?</p> <p>10 A. We don't track that, no.</p> <p>11 Q. Do you know whether HIDTA tracks</p> <p>12 it?</p> <p>13 A. I'm not sure.</p> <p>14 MS. WINNER: I would like to ask</p> <p>15 the reporter to mark as Exhibit 5 a document</p> <p>16 entitled Cleveland Division of Police</p> <p>17 Divisional Notice.</p> <p>18 - - - - -</p> <p>19 (Thereupon, Deposition Exhibit 5, a</p> <p>20 Document Entitled Cleveland Division</p> <p>21 of Police Divisional Notice,</p> <p>22 Beginning with Bates Label CLEVE</p> <p>23 1477135, was marked for purposes of</p> <p>24 identification.)</p> <p>25 - - - - -</p>

<p style="text-align: right;">Page 250</p> <p>1 Q. Have you ever seen this document</p> <p>2 before?</p> <p>3 A. I have.</p> <p>4 Q. What is it?</p> <p>5 A. It is a Cleveland Police Department</p> <p>6 Divisional Notice regarding suspected drug</p> <p>7 overdose investigations.</p> <p>8 Q. What is a divisional notice?</p> <p>9 A. It is a notification that the</p> <p>10 division of police sends out to all its units,</p> <p>11 and so that it is a massive notification for</p> <p>12 the whole division. Everybody gets it.</p> <p>13 Q. Have different versions of this one</p> <p>14 gone out at different times?</p> <p>15 A. I'm not aware of it, but</p> <p>16 I'm -- there may have been revisions done to</p> <p>17 this.</p> <p>18 Q. Do they typically go out over the</p> <p>19 signature of the chief?</p> <p>20 A. Yes.</p> <p>21 Q. The last item on the first page,</p> <p>22 under item F, there is a reference to something</p> <p>23 called an RMS report?</p> <p>24 A. Correct.</p> <p>25 Q. What is an RMS report?</p>	<p style="text-align: right;">Page 252</p> <p>1 A. Yes. Uh-uh.</p> <p>2 Q. Was this the notice that changed</p> <p>3 the policy so that all of the nonfatal</p> <p>4 overdoses were given the same treatment?</p> <p>5 A. It appears that way, yes.</p> <p>6 Q. So the unit -- so this was</p> <p>7 basically a notice of a change in policy,</p> <p>8 correct?</p> <p>9 A. Yes.</p> <p>10 Q. The next to the last paragraph on</p> <p>11 the second page says, "This policy does not</p> <p>12 include obvious suicides involving drugs." Has</p> <p>13 that been the policy all along?</p> <p>14 A. Yes.</p> <p>15 Q. How is an obvious suicide</p> <p>16 determined?</p> <p>17 A. If there is -- the responding</p> <p>18 officers would have to make that determination</p> <p>19 and the supervisor. There may be a suicide</p> <p>20 note left behind, a family member may have been</p> <p>21 aware or been on the phone with the individual</p> <p>22 when they committed suicide. So there is</p> <p>23 multiple reasons how they would know.</p> <p>24 Q. But obvious had to be truly</p> <p>25 obvious?</p>
<p style="text-align: right;">Page 251</p> <p>1 A. That is the old record management</p> <p>2 system that was replaced by LERMS.</p> <p>3 Q. When was LERMS brought in?</p> <p>4 A. Maybe three years ago,</p> <p>5 approximately.</p> <p>6 Q. What happened to all the data that</p> <p>7 was in the old system?</p> <p>8 A. I think it was -- let's see. I</p> <p>9 think they populated it into the new system.</p> <p>10 Is that what the word is?</p> <p>11 Q. So if you need something from an</p> <p>12 investigation eight years ago, you could get</p> <p>13 that from LERMS?</p> <p>14 A. Correct.</p> <p>15 Q. Then in the next line, there is a</p> <p>16 reference to something called VSDL?</p> <p>17 A. Correct.</p> <p>18 Q. What does VSDL mean?</p> <p>19 A. Violation of state drug law.</p> <p>20 Q. If you turn to the second page,</p> <p>21 there is a Roman numeral II, it refers to</p> <p>22 nonfatal suspected drug overdoses.</p> <p>23 A. Uh-huh.</p> <p>24 Q. It says, "Suspended use section 1</p> <p>25 directives"; do you see that?</p>	<p style="text-align: right;">Page 253</p> <p>1 A. Correct.</p> <p>2 Q. I would like to ask the reporter to</p> <p>3 mark as Exhibit 6 a document entitled Threat</p> <p>4 Assessment and Strategy Program Year 2017 --</p> <p>5 Program Year 2017.</p> <p>6 - - - - -</p> <p>7 (Thereupon, Deposition Exhibit 6, A</p> <p>8 Document Entitled Threat Assessment</p> <p>9 and Strategy Program Year 2017,</p> <p>10 Beginning with Bates Label CLEVE</p> <p>11 220709, was marked for purposes of</p> <p>12 identification.)</p> <p>13 - - - - -</p> <p>14 Q. Have you ever seen this before?</p> <p>15 A. I do not recall reading this</p> <p>16 before. I don't recall seeing this.</p> <p>17 Q. Were you aware that this threat</p> <p>18 assessment document existed?</p> <p>19 A. I'm aware that they do threat</p> <p>20 assessments. I just don't recall seeing this</p> <p>21 document.</p> <p>22 MS. WINNER: My apologies. That's</p> <p>23 my phone doing something I don't know how to</p> <p>24 turn off.</p> <p>25 Q. So I take it you did not play any</p>

<p style="text-align: right;">Page 254</p> <p>1 role in putting together this document?</p> <p>2 A. Not that I'm aware of.</p> <p>3 Q. Do you know who creates the threat</p> <p>4 assessment documents for HIDTA?</p> <p>5 A. No, ma'am, I don't.</p> <p>6 Q. Have you seen threat assessments</p> <p>7 for other years?</p> <p>8 A. I don't recall seeing this specific</p> <p>9 type of document. It may have come across my</p> <p>10 desk, but I don't recall it.</p> <p>11 Q. Have you ever seen the annual</p> <p>12 reports from HIDTA?</p> <p>13 A. I have reviewed some of the annual</p> <p>14 reports.</p> <p>15 Q. And do those come to you routinely</p> <p>16 each year?</p> <p>17 A. I think they do.</p> <p>18 Q. Do you play any role in creating</p> <p>19 those documents?</p> <p>20 A. No, I don't.</p> <p>21 Q. Have you ever seen any inaccuracies</p> <p>22 in any of those?</p> <p>23 A. Not that I recall.</p> <p>24 Q. Have you ever spoken to the media</p> <p>25 on opioid issues?</p>	<p style="text-align: right;">Page 256</p> <p>1 that ten-minute presentation?</p> <p>2 A. It was more of an awareness talk.</p> <p>3 I kind of showed the participants some</p> <p>4 photographs and explained to them what they</p> <p>5 were, and because what was happening was</p> <p>6 people's friends and families were becoming</p> <p>7 affected by this and overdosing.</p> <p>8 So I kind of gave a talk about how</p> <p>9 a parent could walk through their child's room</p> <p>10 and look for suspicious items that might</p> <p>11 otherwise appear innocent, but could contain,</p> <p>12 you know -- could identify their child as</p> <p>13 possibly abusing drugs or opioids.</p> <p>14 Q. Did you have any prepared remarks</p> <p>15 or slides that you used?</p> <p>16 A. I had some photographs that I used,</p> <p>17 and my remarks were just off my head.</p> <p>18 MS. WINNER: I would like to ask</p> <p>19 the reporter to mark as Exhibit 7 an email from</p> <p>20 Gary Gingell to Harold Pretel, dated May 29,</p> <p>21 2018.</p> <p>22 - - - - -</p> <p>23 (Thereupon, Deposition Exhibit 7, An</p> <p>24 Email From Gary Gingell to Harold</p> <p>25 Pretel, Dated May 29, 2018,</p>
<p style="text-align: right;">Page 255</p> <p>1 A. I think I had one occasion to speak</p> <p>2 to the media, and that was regarding an</p> <p>3 officer's safety situation.</p> <p>4 Q. And was that the issue of officer</p> <p>5 safety from exposure to fentanyl?</p> <p>6 A. That's correct.</p> <p>7 Q. Have there been any other</p> <p>8 occasions?</p> <p>9 A. Not that I recall.</p> <p>10 Q. Are you authorized to speak to the</p> <p>11 media?</p> <p>12 A. I was contacted by the chief's</p> <p>13 office at that time. So I wouldn't speak to</p> <p>14 the media, unless I was authorized to do so.</p> <p>15 Q. Is that general department policy?</p> <p>16 A. Yes.</p> <p>17 Q. Have you made speeches or other</p> <p>18 public presentations relating to drugs?</p> <p>19 A. On one occasion, I went to a city</p> <p>20 council, it was the Cuyahoga County City</p> <p>21 Council Association, and I talked to them for</p> <p>22 maybe ten minutes about opioids.</p> <p>23 Q. When was that?</p> <p>24 A. Maybe about a year ago.</p> <p>25 Q. And what did you discuss, during</p>	<p style="text-align: right;">Page 257</p> <p>1 Beginning with Bates Label CLEVE</p> <p>2 253969, was marked for purposes of</p> <p>3 identification.)</p> <p>4 - - - - -</p> <p>5 Q. Does this look familiar?</p> <p>6 A. Yes, I recall seeing this.</p> <p>7 Q. It refers to something called a</p> <p>8 heroin/opiate summit?</p> <p>9 A. Correct.</p> <p>10 Q. Can you tell me what that is?</p> <p>11 A. It was a gathering of community</p> <p>12 leaders, law enforcement, medical educators,</p> <p>13 people involved in the treatment of opioid</p> <p>14 abuse, and it was put on by The Cleveland</p> <p>15 Clinic Foundation.</p> <p>16 Q. And Cleveland Clinic had done one</p> <p>17 of those in 2014?</p> <p>18 A. Either that -- yes, a few years</p> <p>19 before, correct.</p> <p>20 Q. And had you attended the prior one?</p> <p>21 A. No, ma'am.</p> <p>22 Q. Did you attend this one?</p> <p>23 A. I attended this one for Commander</p> <p>24 Gingell, who was unavailable.</p> <p>25 Q. Did you speak at this conference?</p>

<p style="text-align: right;">Page 258</p> <p>1 A. I did not.</p> <p>2 Q. So you just attended?</p> <p>3 A. Correct.</p> <p>4 Q. And was it -- what was the</p> <p>5 geographic scope of this conference?</p> <p>6 A. The geographic scope, could you --</p> <p>7 Q. The whole state, the northern</p> <p>8 Ohio --</p> <p>9 A. I don't know all the players. It</p> <p>10 was a large conference. I would say it was</p> <p>11 probably Northeast Ohio, but it could have been</p> <p>12 the whole state. I'm not sure about all the</p> <p>13 attendees and where they came from. I was not</p> <p>14 privy to that information.</p> <p>15 Q. Were there any handouts or</p> <p>16 materials from that conference that you took</p> <p>17 away with you?</p> <p>18 A. I don't recall, but if I took</p> <p>19 anything, I would have turned it over to</p> <p>20 Commander Gingell. I don't recall bringing</p> <p>21 anything home though.</p> <p>22 MS. WINNER: I would like to ask</p> <p>23 the reporter to mark as Exhibit 8 an email to</p> <p>24 Harold Pretel from Zina Martinez.</p> <p>25 - - - - -</p>	<p style="text-align: right;">Page 260</p> <p>1 to go to this event.</p> <p>2 Q. They already had your head shots?</p> <p>3 A. They had everything but me. So I</p> <p>4 did not attend it, and I did not present at it.</p> <p>5 Q. Did somebody take your place?</p> <p>6 A. No.</p> <p>7 Q. What had you intended to speak</p> <p>8 about?</p> <p>9 A. The opioid crisis. I think just</p> <p>10 some general safety information. Once again,</p> <p>11 we were going to talk about officer safety and</p> <p>12 how -- I'm sorry -- how this is affecting the</p> <p>13 community, and there was a lot about it that</p> <p>14 had to do -- and Detective Moran was the</p> <p>15 primary presenter. I was kind of a backup on</p> <p>16 this one.</p> <p>17 Q. How did you become involved in this</p> <p>18 officer safety issue? One would have thought</p> <p>19 it would have been a field operations issue.</p> <p>20 A. I think I became involved in it</p> <p>21 because I was the supervisor, at the time, of</p> <p>22 the HIDI guys.</p> <p>23 Q. And did the HIDI guys have to take</p> <p>24 special precautions during this period?</p> <p>25 A. Yes.</p>
<p style="text-align: right;">Page 259</p> <p>1 (Thereupon, Deposition Exhibit 8, An</p> <p>2 Email to Harold Pretel from Zina</p> <p>3 Martinez, Beginning with Bates Label</p> <p>4 CLEVE 254246, was marked for</p> <p>5 purposes of identification.)</p> <p>6 - - - - -</p> <p>7 Q. Do you recognize this?</p> <p>8 A. I do.</p> <p>9 Q. And I'm actually focused on the</p> <p>10 email from you that appears right under the one</p> <p>11 from Zina Martinez, and it is an email from you</p> <p>12 to Marti Lambert, correct?</p> <p>13 A. Right. Okay.</p> <p>14 Q. Who is Marti Lambert?</p> <p>15 A. He was one of the organizers of</p> <p>16 this event, and I never met him.</p> <p>17 Q. What event does this exchange</p> <p>18 relate to?</p> <p>19 A. I believe it was, like, an opioid</p> <p>20 crisis meeting.</p> <p>21 Q. And what was the name of the event?</p> <p>22 A. I actually don't recall.</p> <p>23 Q. Who participated in the event?</p> <p>24 A. I did not. I ended up having a</p> <p>25 knee surgery, I hurt my knee, and I was unable</p>	<p style="text-align: right;">Page 261</p> <p>1 MS. WINNER: I would like to ask</p> <p>2 the reporter to mark as Exhibit 9 several pages</p> <p>3 of head shots for speakers for the Seventh</p> <p>4 Australasian Drug and Alcohol Strategy</p> <p>5 Conference.</p> <p>6 - - - - -</p> <p>7 (Thereupon, Deposition Exhibit 9,</p> <p>8 Several Pages of Head Shots For</p> <p>9 Speakers For the Seventh</p> <p>10 Australasian Drug and Alcohol</p> <p>11 Strategy Conference, was marked for</p> <p>12 purposes of identification.)</p> <p>13 - - - - -</p> <p>14 Q. Is this a different conference, or</p> <p>15 is this the same one you didn't go to?</p> <p>16 A. No. This is a different conference</p> <p>17 from 20- -- maybe -- 15.</p> <p>18 Q. It looks like it.</p> <p>19 What was this conference?</p> <p>20 A. I was invited to speak at this</p> <p>21 conference with Mike Brunswick, special agent</p> <p>22 from the FBI, and Joe Pinjuh, who was a U.S.</p> <p>23 attorney for the Northern District of Ohio. I</p> <p>24 spoke with Mike Brunswick about task force</p> <p>25 investigations, but it wasn't specifically</p>

<p style="text-align: right;">Page 262</p> <p>1 related to opioids.</p> <p>2 Q. And this was in Australia?</p> <p>3 A. Correct.</p> <p>4 Q. So you weren't focusing</p> <p>5 particularly on opiates?</p> <p>6 A. No, ma'am.</p> <p>7 Q. Are there any other conferences of</p> <p>8 this general kind that you have spoken at?</p> <p>9 A. I have spoken at very few, so this</p> <p>10 would have been one, like I said, the meeting</p> <p>11 with the city council members, and that may be</p> <p>12 it.</p> <p>13 That's something that I don't do on</p> <p>14 a normal basis, only when asked, and only if</p> <p>15 absolutely necessary. So if I forget one, I</p> <p>16 apologize. It's not for any other reason than</p> <p>17 I just forgot.</p> <p>18 MS. WINNER: Let me ask the court</p> <p>19 reporter to market as Exhibit 10 a document</p> <p>20 entitled STANCE, S-T-A-N-C-E, Executive</p> <p>21 Committee Minutes, November 22, 2016.</p> <p>22 - - - - -</p> <p>23 (Thereupon, Deposition Exhibit 10, A</p> <p>24 Document Entitled STANCE, Executive</p> <p>25 Committee Minutes, November 22,</p>	<p style="text-align: right;">Page 264</p> <p>1 on this meeting for him.</p> <p>2 Q. The last paragraph on this first</p> <p>3 page reports you as having reported on</p> <p>4 carjackings?</p> <p>5 A. Yes.</p> <p>6 Q. Is that something that you commonly</p> <p>7 did?</p> <p>8 A. No. But once again, I sat on this</p> <p>9 meeting, I must have had some prepared</p> <p>10 statistics for them, but we did have a</p> <p>11 carjacking problem back in 2016, so that must</p> <p>12 have been why I brought it up.</p> <p>13 Q. Does your department, to your</p> <p>14 knowledge, have any budget line items that</p> <p>15 relate exclusively to opioids?</p> <p>16 A. I don't have that information. I</p> <p>17 don't know.</p> <p>18 Q. Who would know the answer to that</p> <p>19 question?</p> <p>20 A. Budget line items. I would go to</p> <p>21 the chief's office, but I don't know. Budget</p> <p>22 line items, maybe the deputy chief of</p> <p>23 administrative operations.</p> <p>24 Q. Is was that something that you</p> <p>25 would expect Commander Gingell to know?</p>
<p style="text-align: right;">Page 263</p> <p>1 2016, Beginning with Bates Label</p> <p>2 CLEVE 352629, was marked for</p> <p>3 purposes of identification.)</p> <p>4 - - - - -</p> <p>5 Q. Do you recognize this document?</p> <p>6 A. I don't remember seeing it, but I</p> <p>7 recognize the overall document.</p> <p>8 Q. You are listed as one of those</p> <p>9 present, correct?</p> <p>10 A. Yes.</p> <p>11 Q. Are you the only Mike Connelly in</p> <p>12 this group, as far as you know?</p> <p>13 A. I'm sure it's me.</p> <p>14 Q. Glancing at this document, does</p> <p>15 this help you remember what STANCE is or was?</p> <p>16 A. I remember sitting on</p> <p>17 this -- sitting in for this meeting, evidently,</p> <p>18 for Commander Gingell. He's the one that goes</p> <p>19 to these meetings. It might be Stand Together</p> <p>20 Against Crime, or something. I don't recall</p> <p>21 what the acronym stands for.</p> <p>22 Q. So this is not something you</p> <p>23 regularly did?</p> <p>24 A. No. Commander Gingell must have</p> <p>25 been off, and he must have asked me to sit in</p>	<p style="text-align: right;">Page 265</p> <p>1 A. I don't think so.</p> <p>2 Q. Does he manage the budget?</p> <p>3 A. No.</p> <p>4 Q. Well, you said earlier that you</p> <p>5 managed the budget for your task force; is that</p> <p>6 correct?</p> <p>7 A. The grant.</p> <p>8 Q. The grant.</p> <p>9 A. Just the grant.</p> <p>10 Q. And am I correct that -- what does</p> <p>11 that entail, what do you actually do to manage</p> <p>12 the grant, what activities do you perform?</p> <p>13 A. I would -- for example, overtime is</p> <p>14 one of the main items on the grant. So the</p> <p>15 individual agency heads, or timekeeping person,</p> <p>16 would still send me a monthly or a quarterly</p> <p>17 request for overtime reimbursement. I would</p> <p>18 compile that reimbursement, type up a memo, and</p> <p>19 send it to the City of Cleveland Public Safety</p> <p>20 budget administrator. They would check all</p> <p>21 those numbers and cut checks to each one of</p> <p>22 those cities, reimbursing them for the</p> <p>23 overtime.</p> <p>24 I would be responsible for any</p> <p>25 confidential funds that were used in the -- as</p>



<p style="text-align: right;">Page 266</p> <p>1 part of an investigation. So an individual  2 investigator needed confidential funds, they  3 would come to me for the request. I would  4 provide those confidential funds. They would  5 have to provide me a report and an expenditure  6 sheet, and then I keep track of all those  7 funds. So that's basically my -- and then I  8 would make sure that we don't spend more money  9 than we have, and we spend it, you know,  10 accordingly.  11 Q. And "confidential funds," is that  12 money used to pay confidential sources?  13 A. And money to buy -- make undercover  14 drug buys as well.  15 Q. Now, on the overtime expense, am I  16 correct that the grant -- well, we looked  17 earlier at a document with a grant application  18 that asked for a specific sum of money?  19 A. Correct.  20 Q. And a big chunk of that was for  21 overtime, correct?  22 A. Yes.  23 Q. Was that overtime, does that  24 overtime money all go -- that's in that  25 particular grant application all go to</p>	<p style="text-align: right;">Page 268</p> <p>1 paid, I would be the one to pay the phone bill.  2 So those are all the items.  3 Q. Is there a phone bill to be paid?  4 A. There is not.  5 Q. Okay. Do you know how much of the  6 Cleveland Police Department's budget goes to  7 the narcotics unit?  8 A. I do not.  9 Q. Do you know how much -- do you know  10 anything at all about the Cleveland Police  11 Department's budget?  12 A. No.  13 Q. That shortens that.  14 Do you have any involvement with  15 any of the drug courts?  16 A. I don't.  17 Q. Does anybody in either of your two  18 commands have anything to do with drug courts?  19 A. Not that I'm aware of. I don't  20 recall any of my detectives or sergeants or my  21 supervisors going or meeting with drug court.  22 Q. I take it that the kinds of people  23 you tend to -- your unit tends to arrest are  24 not eligible for any special treatment in drug  25 court generally?</p>
<p style="text-align: right;">Page 267</p> <p>1 Cleveland officers, or does it get divided up  2 among all members of the task force?  3 A. It gets divided up.  4 Q. So the grant is made by the state  5 to Cleveland, Cleveland then pays some of its  6 own officers overtime --  7 A. Correct.  8 Q. -- but also officers from Cuyahoga  9 or other places?  10 A. Correct.  11 Q. Is this money only used for  12 overtime for the local law enforcement?  13 A. Yes.  14 Q. So overtime for FBI agents is paid  15 out of a different pot?  16 A. Correct.  17 Q. Is there anything else you do to  18 control or manage the budget, other than what  19 you have already described?  20 A. Well, there is basically -- there  21 could be equipment purchases, there could be  22 travel arrangements needed to be made for  23 investigative travel or training. So I would  24 be the one that would manage that as well.  25 If there was a phone bill to be</p>	<p style="text-align: right;">Page 269</p> <p>1 MS. ZIMMERMANN: Object to form.  2 You may answer.  3 A. Generally.  4 MS. WINNER: Why don't we take a  5 break.  6 MS. ZIMMERMANN: How much time do  7 you need?  8 THE VIDEOGRAPHER: Off the record  9 at 3:50.  10 (Recess taken.)  11 THE VIDEOGRAPHER: On the record,  12 4:04.  13 EXAMINATION OF MICHAEL CONNELLY  14 BY MR. SHAPLAND:  15 Q. Lieutenant Connelly, I'm Eric  16 Shapland. I represent Endo Pharmaceuticals, a  17 defendant in this action, and I'm also the  18 secondary questioner for this deposition, doing  19 so on behalf of all the manufacturers who are  20 defendants in this litigation.  21 A. Okay.  22 Q. You know we are getting closer to  23 the end of today's proceedings by the fact that  24 I have taken over as secondary questioner here.  25 So the first thing I'm going to do</p>

<p style="text-align: right;">Page 270</p> <p>1 is I'm going to run through some points of your 2 testimony from earlier today where I would like 3 a little bit more clarification. 4 A. Okay. 5 Q. And then I have a few of my own 6 additional questions. So if it seems a little 7 bit like I'm jumping around a bit, it's because 8 I am, jumping back through what we have 9 testified to today. 10 The first thing I want to cover is 11 the concept of overprescribing of opioids. And 12 I think earlier today you testified that, in 13 your view, overprescribing of opioids by 14 doctors is one of the reasons why we are 15 currently in this opioid epidemic today; is 16 that correct? 17 A. That's correct. 18 Q. So I want to unpack a little bit 19 what you mean by overprescribing and also 20 explore a little bit about the basis for your 21 opinions in that regard. 22 So first off, overprescribing, your 23 concept of overprescribing, when you use the 24 term overprescribing, do you use that to refer 25 to instances, among other things, where doctors</p>	<p style="text-align: right;">Page 272</p> <p>1 Argumentative. You may answer, Lieutenant. 2 A. They are part of that, is where I 3 gain my opinion, but also part of it is from 4 taking part in some of the interviews with our 5 overdose victims and gaining information from 6 them, as to how they ended up addicted. 7 Q. Right. And so any time that you 8 would receive that kind of information from an 9 overdose victim who has survived, you would put 10 that into your report? 11 A. I don't write any reports. 12 Q. Okay. So this is just -- do you 13 have any sense for how often that you were 14 provided with this kind of information from an 15 overdose victim? 16 A. No, sir, I don't. 17 Q. And what kind of information they 18 provided you? 19 A. I can't give you specifics here 20 today. 21 Q. All right. And often addicts are 22 less than trustworthy individuals, correct? 23 MS. ZIMMERMANN: Object to form. 24 A. That's true. 25 Q. They tend to blame others for</p>
<p style="text-align: right;">Page 271</p> <p>1 write fake prescriptions in order to allow 2 somebody to use a product for abuse? 3 A. No. 4 MS. ZIMMERMANN: Object to form. 5 A. No, that's not what I mean by 6 overprescribing. 7 Q. Do you mean situations where 8 patients are actually faking a condition in 9 order to secure from their doctors a 10 prescription for opioids? 11 A. No. 12 Q. Okay. So you are referring to what 13 then? 14 A. I'm referring to when the physician 15 writes a prescription for more opioids than are 16 necessary for whatever condition the patient 17 has. 18 Q. So are you a doctor? 19 A. I am not. 20 Q. So you are taking it at face value, 21 based on a report from somebody else, a 22 determination that somebody else has made that 23 people within the medical profession have 24 prescribed opioids too freely, correct? 25 MS. ZIMMERMANN: Object to form.</p>	<p style="text-align: right;">Page 273</p> <p>1 problems that they brought onto themselves? 2 A. That could happen. 3 MS. ZIMMERMANN: Object to form. 4 Go ahead and answer. 5 Q. Did you ever investigate a doctor 6 that was alleged to have, quote unquote, 7 overprescribed opioids? 8 A. I was never the lead investigator, 9 no. 10 Q. And you called Mr. Prince your 11 expert in that regard; is that correct? 12 A. That's correct. 13 Q. So you don't know to what extent 14 doctors were overprescribing opioids, correct? 15 A. I don't. 16 Q. But you believe, it is your own 17 opinion, as a personal opinion, that that is 18 one of the reasons for why we have an opioid 19 epidemic today? 20 A. Correct. 21 Q. Another reason why we have an 22 opioid epidemic today, I think you would agree, 23 is the supply of heroin and fentanyl into the 24 City of Cleveland; is that correct? 25 A. Is why we have an epidemic?</p>

<p style="text-align: right;">Page 274</p> <p>1 Q. Yeah.</p> <p>2 A. That's why we have the overdoses,</p> <p>3 correct.</p> <p>4 Q. Right. And, in fact, currently the</p> <p>5 supply of heroin is so great that it's fueling</p> <p>6 the epidemic today, correct?</p> <p>7 MS. ZIMMERMANN: Object to form.</p> <p>8 A. It is, that is correct.</p> <p>9 Q. Correct. So you are the</p> <p>10 co-commander of the Northern Ohio Law</p> <p>11 Enforcement Task Force, correct?</p> <p>12 A. Correct.</p> <p>13 Q. And for shorthand purposes, we are</p> <p>14 going to refer to that as task force.</p> <p>15 A. Sure.</p> <p>16 Q. Otherwise, we would never finish</p> <p>17 today, interjecting that into every sentence.</p> <p>18 And the focus of your</p> <p>19 responsibility is actually to investigate</p> <p>20 individuals who are bringing drugs into the</p> <p>21 county?</p> <p>22 A. Correct.</p> <p>23 Q. So where does the heroin come from?</p> <p>24 A. The bulk of our heroin comes from</p> <p>25 the Mexican cartels.</p>	<p style="text-align: right;">Page 276</p> <p>1 today?</p> <p>2 MS. ZIMMERMANN: Object to form.</p> <p>3 Objection, speculative. You may answer,</p> <p>4 Lieutenant.</p> <p>5 A. Could you please ask that one more</p> <p>6 time for me.</p> <p>7 Q. Yeah. If people are growing more</p> <p>8 opium plants and making more heroin, is that</p> <p>9 one of the factors contributing to the current</p> <p>10 heroin crisis today?</p> <p>11 MS. ZIMMERMANN: Same objections.</p> <p>12 A. So more availability of the heroin</p> <p>13 within our country, I think that would be a</p> <p>14 contributing factor.</p> <p>15 Q. Do you have any estimates as to how</p> <p>16 much heroin is actually making it into</p> <p>17 Cleveland?</p> <p>18 A. I don't.</p> <p>19 Q. Do you use any kind of indicators,</p> <p>20 in order to create some rough estimate, as to</p> <p>21 the amount of heroin that makes it into the</p> <p>22 City of Cleveland?</p> <p>23 MS. ZIMMERMANN: Object to form.</p> <p>24 Objection, asked and answered. You may answer.</p> <p>25 A. I believe that the seizure</p>
<p style="text-align: right;">Page 275</p> <p>1 Q. Right. And more specifically, they</p> <p>2 grow the heroin, they grow actually opium</p> <p>3 poppies, correct?</p> <p>4 A. That is correct.</p> <p>5 Q. And where do they grow those</p> <p>6 plants?</p> <p>7 A. Within the country of Mexico?</p> <p>8 Q. Uh-uh.</p> <p>9 A. I don't know the exact location</p> <p>10 that they are growing them.</p> <p>11 Q. Right. And do you know what the</p> <p>12 trends are, with respect to the amount of</p> <p>13 plants that are grown?</p> <p>14 MS. ZIMMERMANN: Object to form.</p> <p>15 A. I do not.</p> <p>16 Q. Are you familiar with the UNODC,</p> <p>17 that's the UN Office of Drug Crimes report with</p> <p>18 respect to the growth of opium around the</p> <p>19 world?</p> <p>20 A. I'm not familiar with that.</p> <p>21 Q. So if that were a trend, if there</p> <p>22 were an upward trend in the amount of opium</p> <p>23 plants that are grown each year, that would</p> <p>24 also be another contributing factor towards the</p> <p>25 extent of heroin abuse in the United States</p>	<p style="text-align: right;">Page 277</p> <p>1 information would be an indicator to the</p> <p>2 amount. So if the seizures last year were less</p> <p>3 than this year, then they would indicate that</p> <p>4 there -- more heroin is making it to the city.</p> <p>5 Q. And how many multiples more heroin</p> <p>6 make it into the city than are seized, as a</p> <p>7 rule of thumb?</p> <p>8 A. I don't have that information.</p> <p>9 Q. So you don't have any sense for how</p> <p>10 much more heroin is imported into the city than</p> <p>11 seized?</p> <p>12 A. I can't give you that. I don't</p> <p>13 have that information, sir.</p> <p>14 Q. You don't use any kind of -- just</p> <p>15 even a vague rule of thumb to have some kind of</p> <p>16 estimate as to the problem you are up against?</p> <p>17 MS. ZIMMERMANN: Objection. Asked</p> <p>18 and answered.</p> <p>19 A. Sir, I don't have that answer. I'm</p> <p>20 sorry.</p> <p>21 Q. Fair enough. I do want to talk --</p> <p>22 ask you a couple questions about specifically</p> <p>23 the grant proposal from 2016, and it is in</p> <p>24 reference to the fact that you have three</p> <p>25 ongoing heroin investigations right now, and</p>

<p style="text-align: right;">Page 278</p> <p>1 that's roughly how many you have going on at  2 any given point in time; do you recall that  3 testimony?  4 A. Yes.  5 Q. And each one of those specific  6 investigations, is that an investigation of a  7 particular drug trafficking organization?  8 A. It can be, but they are in  9 different stages of the investigation. One may  10 just be beginning, where one may just be  11 ending.  12 Q. All right. So at any given point  13 in time, you have roughly three different drug  14 trafficking organizations under investigation?  15 MS. ZIMMERMANN: Object to form.  16 A. Once again, we may have identified  17 a full organization, or we may have identified  18 just a small group of people. We don't know if  19 we have a complete organization until we move  20 on with that investigation. So I can't tell  21 you how big it is going to get until we  22 thoroughly investigate.  23 Q. And once you have thoroughly  24 investigated and you have come close to  25 reaching the end of your investigation, at that</p>	<p style="text-align: right;">Page 280</p> <p>1 Q. I'm looking for then a range.  2 A. From --  3 MS. ZIMMERMANN: Same objection.  4 Q. Okay.  5 A. I'm sorry. Could you ask the  6 question one more time, so I'm clear.  7 Q. Yeah. Could you provide me with a  8 range, in terms of kilograms per month or week  9 or year, that drug trafficking organizations  10 would be bringing into the City of Cleveland,  11 any particular drug trafficking organization?  12 MS. ZIMMERMANN: Object to form.  13 A. I can't, I'm sorry, but I can't  14 give you a specific answer to that question,  15 because they are all different.  16 So one organization may be bringing  17 two or three kilos in a month, and another  18 organization could be bringing in ten or more  19 kilos in a month.  20 Q. What's the most you have seen?  21 A. Maybe 15 or 20.  22 Q. And what's the least you have seen  23 from a drug trafficking organization under  24 investigation by your office?  25 A. Less than a kilo.</p>
<p style="text-align: right;">Page 279</p> <p>1 point in time, haven't you come to some sense  2 about how much heroin the organization is  3 bringing into the City of Cleveland?  4 A. Well, we try to -- we try to get an  5 adjustment about how much they are bringing in,  6 that's correct.  7 Q. Right. And with respect to --  8 strike that.  9 On average, is how many kilograms  10 of heroin is a drug trafficking organization  11 bringing into Cleveland, on any given time  12 period basis, something that you might be  13 familiar with?  14 If I have to state the question in  15 terms of a month or a week or a year, just to  16 help you --  17 A. It's hard for me to answer that  18 question -- I'm sorry.  19 MS. ZIMMERMANN: Object to form.  20 Go ahead.  21 A. It's hard for me to answer that  22 question, because every organization is  23 different, and their supply lines are  24 different. So I can't give you an average, if  25 you are looking for an average.</p>	<p style="text-align: right;">Page 281</p> <p>1 Q. And what would you -- would these  2 numbers be reflected in files that are within  3 your office?  4 A. In our seizure reports, yes.  5 Q. Well, back up. Would they be -- I  6 want to get to seizures in a minute, but would  7 they be reflected anywhere else in your files?  8 A. They may be part of the ongoing  9 investigative file.  10 Q. Right. As you develop a case, you  11 start to get a sense for how much a  12 particular --  13 A. Correct.  14 Q. -- drug trafficking organization is  15 bringing, and you will reflect that information  16 in your file?  17 A. Correct.  18 Q. And where are those files kept?  19 A. At the -- I'm going to guess -- I'm  20 sorry.  21 Each individual file is kept in our  22 office, and then the U.S. attorney would get a  23 copy of that file as well.  24 Q. How many DTOs are in the -- I'm  25 sorry, I used an acronym without defining it.</p>

<p style="text-align: right;">Page 282</p> <p>1 How many drug trafficking 2 organizations are in the Ohio -- Cuyahoga 3 County? 4 A. I don't know. 5 Q. That's not information that you've 6 learned about by and through your duties as 7 co-commander? 8 A. It is not. 9 Q. Seizure money, what kind of 10 accounting is done of moneys that are seized by 11 your task force? 12 A. The City of Cleveland is a 13 fiduciary for the task force, so all the money 14 that is seized is -- runs through the City of 15 Cleveland, and they manage all that money. 16 Q. And where would the records of 17 those amounts be? 18 A. Public safety, I would imagine. 19 Q. How often do you report that 20 information? Do you turn the funds over? 21 A. Oh, no, we don't see the money. 22 The money doesn't come to us. We get the 23 initial seizure, and then the process takes it. 24 We deposit the money 25 into -- actually, there is different methods.</p>	<p style="text-align: right;">Page 284</p> <p>1 Q. So how do those get to public 2 safety? 3 A. We hand deliver them. 4 Q. So they start in your office? 5 A. Correct. 6 Q. So actually they are in your office 7 as well? 8 A. Right. I thought you were asking 9 me where they go from my office. 10 Q. No. No. 11 A. So I have a copy of them in my 12 office, and then and I provide a copy to public 13 safety. 14 Q. Did you search for those, in 15 connection with your efforts to produce 16 documents in this case? 17 A. I did not. 18 Q. So earlier you testified that you 19 are not sure about whether the HIDTA email 20 retention policy -- well, strike that. 21 Earlier you testified that you are 22 not sure about the HIDTA email retention 23 policy? 24 A. I don't know what the HIDTA 25 retention policy is.</p>
<p style="text-align: right;">Page 283</p> <p>1 Some of the money is electronically seized, 2 some of the money is taken by cash. Either 3 way, all of that money is funneled through the 4 FBI, and the FBI completes the seizure process. 5 Q. The grant proposal from 2016 -- 6 A. Yes. 7 Q. -- that's the only grant proposal 8 we saw in the production from your files. Do 9 you know where the other grant requests would 10 be? 11 A. Dawn Heartsong. 12 Q. And as far as you know, there would 13 be such a request for grant money through each 14 of the years that you were co-commander for the 15 task force? 16 A. That's correct. 17 Q. You are responsible for making sure 18 that the task force sticks to budget, correct? 19 A. Yes. 20 Q. So you must keep spreadsheets and 21 other records to track actual expenditures 22 versus budget? 23 A. That's correct. 24 Q. And where would those be? 25 A. Public safety.</p>	<p style="text-align: right;">Page 285</p> <p>1 Q. But with respect to emails that you 2 have received to the HIDTA email address that 3 you have, you certainly have preserved emails 4 over time, correct? 5 A. I have. 6 Q. Do you archive emails in files? 7 A. Some, yes. 8 Q. And you have a sent items folder, 9 where you have emails that you have sent from 10 that address? 11 A. Yes. 12 Q. And you have an inbox, where you 13 have emails that you have received from that 14 address -- to that address, correct? 15 A. Yes. 16 Q. Do you know how far back that inbox 17 goes? 18 A. No. 19 Q. Jumping to the HIDTA 20 investigations. 21 A. Okay. 22 Q. All right, the Heroin Involved 23 Death Investigations. 24 At one point you testified that if 25 there was a death where prescription drugs --</p>



<p style="text-align: right;">Page 286</p> <p>1 prescription opioids were in the immediate 2 proximity, you would come to a conclusion that 3 those may have been the cause of the overdose? 4 A. I don't think that's how I 5 testified. 6 Q. So let me rephrase it, the 7 testimony from earlier. 8 You testified that if there was a 9 death that you believed to involve prescription 10 opioids, you would look around to try to 11 find -- to see if there was a prescription for 12 those opioids, correct? 13 A. One of the things that we would do. 14 Q. And that kind of information would 15 be included in the record that you made for the 16 particular death, correct? 17 A. I believe it would, but the medical 18 examiner takes all that evidence. 19 Q. Yeah. And the medical examiner 20 would also have a report? 21 A. So but my point being that if we 22 don't take possession of the evidence, it may 23 not be in our report. 24 Q. So it may be in your report, and it 25 may also be in the medical examiner's report?</p>	<p style="text-align: right;">Page 288</p> <p>1 information. 2 Q. Right. And often family members 3 might even be in the dark as to how -- 4 A. It's possible, yes. 5 Q. And sometimes family members are 6 reluctant to speak to law enforcement about the 7 origin of an opioid addiction in a family 8 member? 9 A. That's correct. 10 Q. And the fact is HIDTA is actually 11 looking for the heroin supplier, at that point 12 in time, correct? 13 A. When? 14 Q. When you are investigating a heroin 15 overdose. 16 A. Right. We are trying to identify 17 the person that sold them the drugs that 18 created the overdose. 19 Q. The scope of your work is not to 20 identify the origin of the addiction? 21 A. That's correct. 22 Q. And, in fact, you are quite an 23 understaffed department, correct? 24 MS. ZIMMERMANN: Object to form. 25 You may answer.</p>
<p style="text-align: right;">Page 287</p> <p>1 A. Correct. 2 Q. But if somebody died because of a 3 prescription opioid overdose, and they had a 4 prescription, and somebody from law enforcement 5 found it, it would be in one of those two 6 places? 7 A. If it was found on the scene; is 8 that what your question is? 9 Q. Yes. 10 A. Yes. 11 Q. You testified with respect to 12 heroin overdoses, that you don't know how far 13 back you go in, kind of, trying to investigate 14 the individual's -- the origin of the 15 individual's addiction? 16 A. If we respond to a heroin overdose? 17 Q. Yes. 18 A. We interview -- are we talking 19 about a fatal overdose or nonfatal overdose? 20 Q. Let's talk about a fatal overdose. 21 A. We interview family members, 22 friends, if they are on scene. If there is 23 nobody on scene, there is nobody to interview. 24 If people are uncooperative, then we can't get 25 the information. So we do our best to get that</p>	<p style="text-align: right;">Page 289</p> <p>1 A. We could use more staffing, that's 2 correct. 3 Q. You don't have the time to go off 4 on a detour to figure out the origin of the 5 addiction, correct? 6 A. The origin of the addiction would 7 be secondary to our investigation. 8 Q. Incidental? 9 A. Correct. 10 Q. You might learn it, and if you 11 learned it, would you write it into your 12 report? 13 A. I can't answer for every detective, 14 if that information made it into every report. 15 Q. You have testified that you have 16 seen abuse of prescription pills, opioid pills 17 in overdosed -- I'm sorry, scratch that. Let 18 me start over. 19 You testified that you have seen 20 abuse of prescription opioids in overdose 21 deaths in instances in which the individual had 22 a prescription for the opioids, correct? 23 A. I believe so, yes. 24 Q. And at first you testified you 25 don't know how often that happens, and then you</p>

<p style="text-align: right;">Page 290</p> <p>1 said, "Well, I think it might be common"?</p> <p>2 A. Well, I think in the context I was</p> <p>3 saying that, it was common for people to have</p> <p>4 had opioid prescriptions in the past, but I'm</p> <p>5 not sure about the question again, sir.</p> <p>6 Q. About whether they were using</p> <p>7 opioids under a prescription at the time of</p> <p>8 their overdose death.</p> <p>9 A. Okay.</p> <p>10 MS. ZIMMERMANN: Object to form.</p> <p>11 Q. And whether it's your opinion that</p> <p>12 that is common.</p> <p>13 A. I'm sorry. Let's try it one more</p> <p>14 time. Let's start over.</p> <p>15 Q. That's fine. I'm trying to unpack</p> <p>16 what happened this morning --</p> <p>17 A. Okay.</p> <p>18 Q. -- and then ask the question.</p> <p>19 So my question for you is what is</p> <p>20 your -- whether you have an opinion as to</p> <p>21 whether it is common for somebody to die from</p> <p>22 an overdose using prescription opioids</p> <p>23 with -- while they have a prescription for the</p> <p>24 opioids?</p> <p>25 A. Okay.</p>	<p style="text-align: right;">Page 292</p> <p>1 Q. Or whether the individual was</p> <p>2 abusing the opioids under the prescription,</p> <p>3 correct?</p> <p>4 A. Unless we were told by a family</p> <p>5 member or friend. So that would be the only</p> <p>6 way we would know.</p> <p>7 Q. So for some of these questions, I</p> <p>8 would like to direct your attention to Exhibit</p> <p>9 14.</p> <p>10 MS. ZIMMERMANN: Exhibit 14? I</p> <p>11 think we only have ten.</p> <p>12 Q. I'm sorry. Exhibit 6.</p> <p>13 So law enforcement keeps records of</p> <p>14 the amount of heroin that is seized in any</p> <p>15 given jurisdiction?</p> <p>16 A. Yes.</p> <p>17 Q. And where are those records kept?</p> <p>18 MS. ZIMMERMANN: Object to form.</p> <p>19 You may answer.</p> <p>20 A. The city -- I send my seizure</p> <p>21 information, through my chain of command, to</p> <p>22 Commander Gingell.</p> <p>23 Q. And then what does he do with them?</p> <p>24 A. I don't know.</p> <p>25 Q. How do you send them?</p>
<p style="text-align: right;">Page 291</p> <p>1 MS. ZIMMERMANN: Object to form.</p> <p>2 You may answer.</p> <p>3 A. I think it is less -- it is -- if I</p> <p>4 said it was common, I may have misspoken,</p> <p>5 because I think it is less common. It is not</p> <p>6 very common.</p> <p>7 But I want to make sure I'm clear.</p> <p>8 For the overdoses that we are seeing now, for</p> <p>9 somebody to currently have a prescription for</p> <p>10 opioids, is that the question?</p> <p>11 Q. Uh-uh.</p> <p>12 A. Okay. So I think that's less</p> <p>13 common now. So if I said it was very common,</p> <p>14 then I misspoke. I misspoke.</p> <p>15 Q. All right. Well, and whatever the</p> <p>16 frequency is, the information would be in the</p> <p>17 HIDTA reports?</p> <p>18 A. If it was recovered?</p> <p>19 Q. Yes.</p> <p>20 A. Right.</p> <p>21 Q. And whenever it occurs, you</p> <p>22 personally don't have an understanding as to</p> <p>23 whether the prescription was legitimate or not,</p> <p>24 correct?</p> <p>25 A. That's correct.</p>	<p style="text-align: right;">Page 293</p> <p>1 A. I provide him -- I normally would</p> <p>2 send him an email.</p> <p>3 Q. And you do so pretty soon after a</p> <p>4 seizure?</p> <p>5 A. No. I mean, normally, I think, it</p> <p>6 is quarterly we do that, and they are compiled</p> <p>7 in a database, I think, on his end.</p> <p>8 Q. Between quarterly circulations of</p> <p>9 this data, you maintain the data on your own,</p> <p>10 in your office?</p> <p>11 A. I don't maintain the data.</p> <p>12 Q. Who maintains the data?</p> <p>13 A. It goes into a system called -- I</p> <p>14 believe it is called DISCO, D-I-S-C-O.</p> <p>15 Q. And what kind of information goes</p> <p>16 into DISCO?</p> <p>17 A. All of our seizure information.</p> <p>18 Q. Okay. So what in specific?</p> <p>19 A. Seizures, arrests, indictments.</p> <p>20 Q. With respect to seizures, quantity?</p> <p>21 A. Yes.</p> <p>22 Q. Nature of the drug?</p> <p>23 A. The type of drug, yes.</p> <p>24 Q. The type of drug?</p> <p>25 A. Uh-huh.</p>

<p style="text-align: right;">Page 294</p> <p>1 Q. What about the purity of the drug?</p> <p>2 A. No.</p> <p>3 Q. And then quarterly you will relay</p> <p>4 that to your commander?</p> <p>5 A. At least quarterly. The DISCO</p> <p>6 stats are completed quarterly. I think they</p> <p>7 compile them every month, and I think they -- I</p> <p>8 don't do them personally. I think it is</p> <p>9 compiled every month, and then a quarterly</p> <p>10 report is completed.</p> <p>11 Q. And do law enforcement agencies for</p> <p>12 multiple jurisdictions then report their data</p> <p>13 to HIDTA?</p> <p>14 A. HIDTA may use the information</p> <p>15 placed into DISCO.</p> <p>16 Q. And aggregate that information on a</p> <p>17 regional basis?</p> <p>18 A. Yes.</p> <p>19 Q. So at page ten of this Threat</p> <p>20 Assessment &amp; Strategy, there is a line at the</p> <p>21 last sentence of the first paragraph, "Heroin</p> <p>22 seizures of 206 kilograms in citywide 2016</p> <p>23 remained higher than pre-citywide 2015 seizure</p> <p>24 rates for heroin."</p> <p>25 Do you have any idea where</p>	<p style="text-align: right;">Page 296</p> <p>1 MS. ZIMMERMANN: Object to form.</p> <p>2 Q. Do you know what the Ohio HIDTA PMP</p> <p>3 data is?</p> <p>4 A. That's their method of compiling</p> <p>5 the stats, the statistics. So I don't know</p> <p>6 what PMP stands for, but that's their method</p> <p>7 of -- they compile the information, they put</p> <p>8 them into a PMP format. They call it PMP.</p> <p>9 I don't do that specifically, but</p> <p>10 that's their statistical -- you know, the way</p> <p>11 of keeping their information.</p> <p>12 Q. And your information is on DISCO?</p> <p>13 A. And in PMP.</p> <p>14 Q. And in PMP. So who controls the</p> <p>15 production of the heroin that's reaching</p> <p>16 Cleveland now?</p> <p>17 A. The Mexican drug cartels.</p> <p>18 Q. And who are they?</p> <p>19 A. I don't know all of them.</p> <p>20 MS. ZIMMERMANN: You can answer.</p> <p>21 Let me just get an objection on the record just</p> <p>22 to the extent it involves any investigative</p> <p>23 privilege, any information involved in ongoing</p> <p>24 investigations, any information about the</p> <p>25 cartel that could implicate the investigations,</p>
<p style="text-align: right;">Page 295</p> <p>1 Mr. Siegel obtained that information to write</p> <p>2 this report regarding the threat assessment and</p> <p>3 strategy for HIDTA?</p> <p>4 A. HIDTA, they also have a database of</p> <p>5 seizure cases as well.</p> <p>6 Q. And seizures for heroin are</p> <p>7 increasing year over year, at this point in</p> <p>8 time, correct?</p> <p>9 A. Can I just quickly just read this?</p> <p>10 Q. Uh-uh.</p> <p>11 A. Okay.</p> <p>12 Q. Oh, I'm sorry.</p> <p>13 A. Oh, I thought you were looking for</p> <p>14 something.</p> <p>15 Q. No. I was waiting for you.</p> <p>16 A. I'm ready.</p> <p>17 Q. So heroin seizures have been on the</p> <p>18 uptake over the last five to ten years?</p> <p>19 A. At least the last five.</p> <p>20 Q. More and more heroin is coming into</p> <p>21 the City of Cleveland than ever before?</p> <p>22 A. That's correct.</p> <p>23 Q. And this report is based on data</p> <p>24 that's collected in a database called Ohio</p> <p>25 HIDTA PMP data?</p>	<p style="text-align: right;">Page 297</p> <p>1 I'll instruct the lieutenant not to answer.</p> <p>2 But, Lieutenant, you may answer, as</p> <p>3 long as we don't go anywhere near that</p> <p>4 privilege.</p> <p>5 A. Okay. So the major drug cartel</p> <p>6 that operates in our area is the Sinaloa drug</p> <p>7 cartel. So that's who we see bringing heroin</p> <p>8 into our area.</p> <p>9 Q. La Familia as well?</p> <p>10 A. I have heard of them, but like I</p> <p>11 said, the one we deal with primarily is</p> <p>12 Sinaloa.</p> <p>13 Q. Los Zetas?</p> <p>14 A. They are -- I've heard them in</p> <p>15 Greater Cleveland -- not Greater Cleveland, but</p> <p>16 in the Ohio area. I don't know about them</p> <p>17 being in Greater Cleveland, but it's possible.</p> <p>18 Q. Those are the three that are</p> <p>19 identified in the threat assessment strategy.</p> <p>20 A. Right.</p> <p>21 Q. And to focus on La Familia, the one</p> <p>22 you have heard of, what is this organization</p> <p>23 like?</p> <p>24 MS. ZIMMERMANN: Object to form.</p> <p>25 A. I'm not really an expert on the</p>

<p style="text-align: right;">Page 298</p> <p>1 Mexican drug cartels. I have a basic knowledge  2 of how they operate, but I'm not an expert on  3 it. So if you are asking me for -- to give my  4 opinion, I can do that.  5 Q. I'm looking for information that  6 you have learned in your role as  7 co-commander --  8 A. Okay.  9 Q. -- of the task force.  10 Are these --  11 A. Specifically, did you ask me?  12 Q. Are they brutal?  13 A. Yes, they are.  14 Q. Are they greedy?  15 A. Yes, they are.  16 Q. Do they have very advanced  17 capabilities of producing and exporting and  18 distributing heroin throughout the United  19 States?  20 A. They do.  21 Q. They have also gotten good at  22 making heroin, right?  23 A. Yes.  24 Q. You referred to the black tar from  25 days gone by.</p>	<p style="text-align: right;">Page 300</p> <p>1 That powder form can be inhaled,  2 correct?  3 A. It can.  4 Q. And the Mexican cartels that are  5 distributing this heroin in the City of  6 Cleveland, they want to find as many users as  7 they can, right?  8 A. Yes.  9 Q. So, for example, they will have  10 somebody add a tester of heroin to a bag of  11 pot?  12 A. Excuse me? Say that one more time.  13 MS. ZIMMERMANN: Object to form.  14 Q. They will have a street level drug  15 dealer add a bag of -- or a tester of heroin to  16 a bag of pot?  17 MS. ZIMMERMANN: Object to form.  18 A. I have no idea what you are talking  19 about.  20 Q. You have never heard of that?  21 A. No.  22 Q. Are they looking for new users?  23 MS. ZIMMERMANN: Objection. Asked  24 and answered. You may answer, Lieutenant.  25 A. They being -- who are we referring</p>
<p style="text-align: right;">Page 299</p> <p>1 A. Correct.  2 Q. They don't make that anymore,  3 right?  4 A. We don't see that very much  5 anymore, correct.  6 Q. Do you know why that is?  7 A. My opinion is they have learned to  8 refine the heroin better and they have a better  9 product.  10 Q. It is a product now that you don't  11 even have to inject, it's a powder, correct?  12 A. It does not come as a powder, no.  13 Q. So the heroin that you are seeing  14 on the streets of Cleveland is not a powder?  15 A. That's its final form. It does  16 not start as being a powder.  17 Q. I see, but when it is  18 actually -- so I should be more clear in my  19 question.  20 By the time that the heroin  21 actually is sold on the street to an individual  22 drug abuser, it is in a powder form?  23 A. Sometimes.  24 Q. And that powder form can be  25 inhaled, right? I'm sorry.</p>	<p style="text-align: right;">Page 301</p> <p>1 to as "they"?  2 Q. The Mexican cartels who are trying  3 to sell heroin in the United States?  4 A. The Mexican cartels are looking for  5 new distributors, and then the distributors  6 sell it to another set of distributors, who  7 eventually sell it to the users.  8 Q. Who are -- go ahead.  9 A. So that's -- I want to make sure,  10 when I answer that question, I'm not saying  11 that the cartels are currently selling to the  12 enduser. When they were selling the black tar  13 heroin, that was the case. Now that's not the  14 case.  15 Q. So eventually, on the street level,  16 you have people who are trying to distribute  17 the heroin, and they are looking for new users?  18 A. That is correct.  19 Q. And in doing so, they are not  20 limiting themselves just to folks who were once  21 taking a prescription for chronic pain, who now  22 are addicted and need something to replace the  23 prescription opioids that they once had access  24 to?  25 MS. ZIMMERMANN: Object to form.</p>

<p style="text-align: right;">Page 302</p> <p>1 A. That's more of a statement.</p> <p>2 Q. That's a question. That is</p> <p>3 correct -- sorry.</p> <p>4 A. I apologize.</p> <p>5 Q. It's okay. They are not limiting</p> <p>6 their potential customer base to just those who</p> <p>7 were once taking prescription opioids for</p> <p>8 chronic pain?</p> <p>9 MS. ZIMMERMANN: Objection. Form.</p> <p>10 Compound. You may answer, to the extent you</p> <p>11 understand.</p> <p>12 A. That's correct.</p> <p>13 Q. Would you agree that heroin from</p> <p>14 Mexican drug trafficking organizations is the</p> <p>15 greatest drug threat to the Ohio HIDTA?</p> <p>16 A. No.</p> <p>17 MS. ZIMMERMANN: Objection to form.</p> <p>18 Q. So if you would look to tab 14, tab</p> <p>19 3.</p> <p>20 MS. ZIMMERMANN: Counsel, you mean</p> <p>21 page 4, or do you mean page 14.</p> <p>22 MR. SHAPLAND: I'm sorry. All my</p> <p>23 notes have that as tab 14, but it's Exhibit 6</p> <p>24 at 3.</p> <p>25 MS. ZIMMERMANN: Exhibit 6, at page</p>	<p style="text-align: right;">Page 304</p> <p>1 Q. So do you agree with that sentence?</p> <p>2 A. No.</p> <p>3 Q. So let's unpack that a little bit,</p> <p>4 because you certainly agree with the truth of</p> <p>5 the statement that all of the law enforcement</p> <p>6 officials responding to the 2017 drug threat</p> <p>7 survey had that opinion?</p> <p>8 MS. ZIMMERMANN: Objection to form.</p> <p>9 Objection. Argumentative. You may answer.</p> <p>10 A. My question would be, I would like</p> <p>11 to see the question specifically that was asked</p> <p>12 to these law enforcement agencies, because</p> <p>13 that's not my opinion.</p> <p>14 Q. So what is your opinion with</p> <p>15 respect to what is the greatest</p> <p>16 threat -- what's the greatest drug threat to</p> <p>17 the region?</p> <p>18 A. Fentanyl.</p> <p>19 Q. Fentanyl. So would you consider</p> <p>20 the heroin provided by the Mexican-based drug</p> <p>21 trafficking organizations to be the second</p> <p>22 greatest drug threat in the region?</p> <p>23 A. It's right there, yeah, it's right</p> <p>24 there, just a step behind the fentanyl.</p> <p>25 Q. I appreciate that clarification.</p>
<p style="text-align: right;">Page 303</p> <p>1 3 or 14?</p> <p>2 MR. SHAPLAND: It is Exhibit 6, at</p> <p>3 page 3.</p> <p>4 MS. ZIMMERMANN: Okay.</p> <p>5 Q. It is the beginning --</p> <p>6 A. I'm sorry. We are on page 3?</p> <p>7 Q. Uh-uh.</p> <p>8 A. Okay.</p> <p>9 Q. So the beginning of page 3, "Once</p> <p>10 again, all of the law enforcement officials</p> <p>11 responding to the 2017 drug threat survey</p> <p>12 identified heroin provided by Mexican-based</p> <p>13 drug trafficking organizations as the greatest</p> <p>14 drug threat in their region."</p> <p>15 A. I don't know where you are reading</p> <p>16 from, sir. I'm missing it.</p> <p>17 Q. That's fine. So it is the</p> <p>18 first -- it is the first sentence of the second</p> <p>19 paragraph.</p> <p>20 A. "Once again," the beginning?</p> <p>21 Q. Uh-uh.</p> <p>22 A. Okay.</p> <p>23 Q. I'll just give you a moment to read</p> <p>24 that passage.</p> <p>25 A. Okay.</p>	<p style="text-align: right;">Page 305</p> <p>1 Do you know how many drug</p> <p>2 trafficking organizations are selling heroin in</p> <p>3 the Ohio HIDTA?</p> <p>4 A. I don't, sir.</p> <p>5 Q. Well, if you would look at page 6</p> <p>6 of Exhibit 6, it is the second to the last</p> <p>7 paragraph on the page. "Within the Ohio HIDTA</p> <p>8 region, 134 of the 233 DTOs identified in CY</p> <p>9 2016 distributed heroin." Do you have any</p> <p>10 reason to disagree with Mr. Siegel's assertion?</p> <p>11 A. Mr. Siegel's assertion is different</p> <p>12 than the question proposed to me.</p> <p>13 Q. Okay.</p> <p>14 A. Mr. Siegel is saying they have</p> <p>15 identified 233 DTOs. Your question was</p> <p>16 broader, asking me how many DTOs there were. I</p> <p>17 don't know. He has identified 233. That</p> <p>18 wasn't your question.</p> <p>19 Q. Again, I appreciate your</p> <p>20 clarification there.</p> <p>21 A. And I wouldn't have been able to</p> <p>22 come up with the 233 number either, just so you</p> <p>23 know.</p> <p>24 Q. And it is 234 DTOs that are</p> <p>25 distributing heroin. He identified 233 DTOs</p>



<p style="text-align: right;">Page 306</p> <p>1 total?</p> <p>2 A. Correct.</p> <p>3 Q. Do you have any reason to disagree</p> <p>4 with his assertion that he had identified 234</p> <p>5 DTOs that were distributing heroin in the Ohio</p> <p>6 HIDTA?</p> <p>7 A. I do not.</p> <p>8 Q. And you testified that you</p> <p>9 personally don't have any idea how many drug</p> <p>10 trafficking organizations are selling, total,</p> <p>11 heroin?</p> <p>12 A. Right, because there may be --</p> <p>13 there are some identified and some still</p> <p>14 unidentified.</p> <p>15 Q. How many have you identified?</p> <p>16 A. I don't have a number for you, sir.</p> <p>17 Q. Do you have a range, 50, 100?</p> <p>18 A. Are we talking total DTOs, or just</p> <p>19 DTOs that are dealing with heroin?</p> <p>20 Q. Well, I was focusing on heroin</p> <p>21 right now.</p> <p>22 A. Right. I just want to make sure I</p> <p>23 have the question properly.</p> <p>24 Q. But if it would be easier for</p> <p>25 you --</p>	<p style="text-align: right;">Page 308</p> <p>1 opened up the territory to every -- the whole</p> <p>2 city or the whole area.</p> <p>3 Q. So fentanyl is the drug that you</p> <p>4 have identified as the greatest threat to the</p> <p>5 Ohio region?</p> <p>6 A. In Mike Connelly's opinion.</p> <p>7 Q. Yes. And fentanyl is not made from</p> <p>8 a plant, correct?</p> <p>9 A. Correct.</p> <p>10 Q. It's made in a lab?</p> <p>11 A. Synthetic, correct.</p> <p>12 Q. And where are those labs?</p> <p>13 MS. ZIMMERMANN: Object to form.</p> <p>14 A. I don't specifically know where all</p> <p>15 the Mexican labs are, but I understand that</p> <p>16 there is labs in Mexico and in China.</p> <p>17 Q. Right. And the fentanyl that they</p> <p>18 make is made for the specific purpose of abuse,</p> <p>19 correct?</p> <p>20 A. That is my understanding.</p> <p>21 Q. And at times, these producers of</p> <p>22 fentanyl have even been able to directly ship</p> <p>23 their product to people, using the courier</p> <p>24 services that work in the region?</p> <p>25 A. That's correct.</p>
<p style="text-align: right;">Page 307</p> <p>1 A. I don't think it is easier to</p> <p>2 answer either of the questions, in all</p> <p>3 honestly, sir.</p> <p>4 Q. Because we don't know?</p> <p>5 A. Because I don't know, right.</p> <p>6 Q. And these drug trafficking</p> <p>7 organizations can be incredibly violent, right?</p> <p>8 A. That's true.</p> <p>9 Q. And lot of the violence is about</p> <p>10 fighting over territory?</p> <p>11 MS. ZIMMERMANN: Object to form.</p> <p>12 A. I would disagree with that.</p> <p>13 Q. Okay.</p> <p>14 A. I think most of the -- I would</p> <p>15 disagree with that premise.</p> <p>16 Q. What does the violence relate to?</p> <p>17 A. And we are talking about not the</p> <p>18 cartels, but the Ohio-based violence?</p> <p>19 Q. Uh-uh.</p> <p>20 A. I think the Ohio-based violence</p> <p>21 that we see is less about territory and more</p> <p>22 about taking what other people have, as far as</p> <p>23 money and assets, because with -- now that</p> <p>24 everybody is so mobile, nobody's territory is</p> <p>25 defined, because vehicles and cell phones have</p>	<p style="text-align: right;">Page 309</p> <p>1 Q. And do you have any estimates as to</p> <p>2 how much fentanyl has been produced in the last</p> <p>3 decade?</p> <p>4 A. I don't, sir.</p> <p>5 Q. Do you have any idea how much</p> <p>6 reaches Cleveland?</p> <p>7 A. No.</p> <p>8 Q. So again on Exhibit 6, at page 13,</p> <p>9 we have seizure data, 2013 for IPDs seized.</p> <p>10 And this data comes from Ohio HIDTA PMP data.</p> <p>11 Do you track similar seizure data</p> <p>12 within your department?</p> <p>13 A. I've never seen a product like this</p> <p>14 within our department, but I know they track</p> <p>15 the seizures.</p> <p>16 Q. And that would be in your database</p> <p>17 called DISCO?</p> <p>18 A. And we are talking about the</p> <p>19 Cleveland Police Department, or are we are</p> <p>20 talking about the Northern Ohio Law Enforcement</p> <p>21 Task Force?</p> <p>22 Q. Well, let's talk about both.</p> <p>23 A. Okay.</p> <p>24 Q. So for purposes of fentanyl</p> <p>25 seizures, where would that -- where would the</p>

<p style="text-align: right;">Page 310</p> <p>1 data regarding those seizures be tracked?</p> <p>2 A. There is redundant methods of</p> <p>3 keeping that, so that our -- both of our -- I'm</p> <p>4 sorry. So let me start over.</p> <p>5 DISCO would track that as well as</p> <p>6 PMP, and we would also send that information to</p> <p>7 Commander Gingell of the Cleveland Police</p> <p>8 Department.</p> <p>9 Q. And just so I'm clear, the DISCO</p> <p>10 data would be within the task force, or is that</p> <p>11 at the Cleveland Police Department?</p> <p>12 A. DISCO is not within the Cleveland</p> <p>13 Police Department. It is a state database, so</p> <p>14 we put our information into -- DISCO is a state</p> <p>15 database.</p> <p>16 Q. And that state database is also</p> <p>17 populated by other police departments within</p> <p>18 the state?</p> <p>19 A. Other drug task forces.</p> <p>20 Q. So I want to move to the abuse of</p> <p>21 prescription opioid pills, and certainly drug</p> <p>22 trafficking organizations have an interest in</p> <p>23 acquiring and selling those too, correct?</p> <p>24 A. Some do.</p> <p>25 Q. And are you aware of how they</p>	<p style="text-align: right;">Page 312</p> <p>1 Q. Well, not a legitimate medical</p> <p>2 purpose, right?</p> <p>3 MS. ZIMMERMANN: Object to form.</p> <p>4 A. As far as -- you know, sir, could</p> <p>5 you just one more time.</p> <p>6 Q. Yeah. This illegal market for</p> <p>7 prescription opioids is supplied with pills</p> <p>8 that have been diverted from a legitimate</p> <p>9 medical purpose?</p> <p>10 MS. ZIMMERMANN: Object to form.</p> <p>11 A. That's hard for me to answer that</p> <p>12 question, but I guess in a broader sense, yes.</p> <p>13 MS. ZIMMERMANN: Counsel, do you</p> <p>14 mind if we take five minutes? Are you near the</p> <p>15 end, or would you mind if we take five minutes?</p> <p>16 MR. SHAPLAND: No, I wouldn't.</p> <p>17 THE VIDEOGRAPHER: Off the record,</p> <p>18 4:58.</p> <p>19 (Recess taken.)</p> <p>20 THE VIDEOGRAPHER: On the record,</p> <p>21 5:12.</p> <p>22 Q. So I would like to direct your</p> <p>23 attention to what is marked as Exhibit 4.</p> <p>24 Do you recall the testimony you</p> <p>25 provided earlier today on Exhibit 4?</p>
<p style="text-align: right;">Page 311</p> <p>1 obtain those pills?</p> <p>2 A. I'm sure there is several different</p> <p>3 methods of the way they obtain them, you know,</p> <p>4 by theft, by deception, by somebody within the</p> <p>5 industry possibly providing it to them, by</p> <p>6 somehow diverting somebody else's</p> <p>7 prescriptions, just to name a couple.</p> <p>8 Q. Having folks go in and doctor shop?</p> <p>9 A. Absolutely.</p> <p>10 Q. Actually having people who are on</p> <p>11 low incomes supplement their income by going to</p> <p>12 doctors and obtaining prescriptions for</p> <p>13 conditions that they don't really have and then</p> <p>14 selling those prescriptions to the DTO?</p> <p>15 MS. ZIMMERMANN: Object to form.</p> <p>16 A. That's possible, yes.</p> <p>17 Q. So there is actually a black</p> <p>18 market, an illegal market for prescription</p> <p>19 opioids?</p> <p>20 A. Absolutely.</p> <p>21 Q. And that market is supplied with</p> <p>22 prescription opioids that have been diverted</p> <p>23 from a legitimate medical purpose?</p> <p>24 A. Among other -- I would imagine</p> <p>25 there would be other ways as well, but, yes.</p>	<p style="text-align: right;">Page 313</p> <p>1 A. Yes.</p> <p>2 Q. And your intent in responding to</p> <p>3 this series of questions was to provide</p> <p>4 truthful and accurate information to your</p> <p>5 daughter's friend?</p> <p>6 A. Yes.</p> <p>7 Q. And in doing so, you provided her</p> <p>8 with your honest opinions?</p> <p>9 A. That's correct.</p> <p>10 Q. You answer the question as to how</p> <p>11 people get started using heroin by saying,</p> <p>12 "There are many different reasons why a person</p> <p>13 begins to use heroin," correct?</p> <p>14 A. Yes.</p> <p>15 Q. And you based that opinion on what?</p> <p>16 A. On my experience as a Cleveland</p> <p>17 police officer.</p> <p>18 Q. Facts you learned from overdose</p> <p>19 investigations?</p> <p>20 A. Yes, that's correct.</p> <p>21 Q. And so sometimes those facts would</p> <p>22 be hearsay statements from addicts?</p> <p>23 MS. ZIMMERMANN: Objection, to the</p> <p>24 to the extent it asks for a legal conclusion.</p> <p>25 I'm sorry, counselor.</p>

<p style="text-align: right;">Page 314</p> <p>1 Q. You would be relying an information 2 that an addict who survived an overdose 3 provided to you, with respect to the reason why 4 they started? 5 A. Correct. 6 Q. And again, sometimes addicts can't 7 be trusted? 8 A. Sometimes, yes. 9 Q. You also hear statements from 10 family members, right? 11 A. Correct. 12 Q. And again, sometimes you are not 13 certain whether those family members know the 14 truth, correct? 15 A. Not all the time, correct. 16 Q. And but to the extent that you 17 learned anything from your investigation, the 18 information that you collected would be 19 recorded in the reports of your investigation? 20 A. Excuse me. Can you repeat that one 21 more time. 22 Q. You would record the information 23 that you learned during your investigation in a 24 report that you are writing on the 25 investigation?</p>	<p style="text-align: right;">Page 316</p> <p>1 addicted to an opioid? 2 MS. ZIMMERMANN: Object to form. 3 A. Correct. 4 Q. And that's a little bit distinct 5 from your further elaboration on point A, which 6 is long-term alcohol and -- alcohol abuse that 7 descends into marijuana abuse, and then 8 eventually looking for a new drug. 9 That's a different course, correct? 10 That's kind of a longer term, downward spiral 11 into an addiction, correct? 12 MS. ZIMMERMANN: Object to form. 13 A. I think it kind -- in my opinion, 14 it kind of like all goes together. You know, 15 sometimes these paths aren't A to B. It could 16 be A, B to C to E. So you are not going always 17 in a straight path. Every individual is 18 different, and the way they end up being 19 addicted is up to that individual person. 20 Q. Right, and these are individuals 21 who are making choices to use and abuse drugs? 22 A. Yes. 23 Q. And the party lifestyle component 24 is also somewhat distinct from just growing up 25 in -- kind of in a family where drug and</p>
<p style="text-align: right;">Page 315</p> <p>1 A. Once again, I don't write reports. 2 I'm usually standing in during these 3 interviews, so I am not the report writer. 4 Q. So somebody that -- what is the 5 word you used. The primary individual doing 6 the investigation would write that information 7 into a report? 8 A. They may or they may not. 9 Q. Your list of core causes is 10 lettered A, B and C, right? 11 A. Yes. 12 Q. But the items on the list cover 13 more than just three root causes, they are kind 14 of broad statements -- 15 A. They are. 16 Q. -- of many different ways. 17 So the first one is a party 18 lifestyle, and that, in and of itself, can 19 involve a whole variety of different 20 circumstances, right? 21 A. That's correct. 22 Q. So it is somebody who likes to 23 party on the weekends, that's experimenting 24 with all sorts of different drugs, takes more 25 and more over time and eventually becomes</p>	<p style="text-align: right;">Page 317</p> <p>1 alcohol abuse is rampant, a lower income 2 family, and where drug use is something that 3 growing up an individual sees his or her 4 parents doing? 5 MS. ZIMMERMANN: Object to form. 6 Compound. 7 A. I'm sorry. Could you limit it, 8 because I lost it. 9 Q. Yeah. I'm just trying to 10 reconcile, figure out what party lifestyle 11 entails. 12 A. Okay. 13 Q. And also kind of drawing out the 14 different types of instances in which an 15 addiction might arise. 16 And another set of circumstances is 17 just growing up in a household where drug and 18 alcohol use is rampant, and there is abuse of 19 drugs and alcohol, and having that as kind of 20 an example, as you are growing up, is another 21 indicator of or contributor to somebody's 22 decision later in life to become a heroin user? 23 MS. ZIMMERMANN: Object to form. 24 Compound. Speculative. You may answer, 25 Lieutenant, if that's a question.</p>

<p style="text-align: right;">Page 318</p> <p>1 A. I know. It's sort of like you are 2 making a statement to me, and it's such a long 3 statement. Could you break it down into, like, 4 individual questions? 5 Q. Look at your answer to question 6. 6 A. Okay. 7 Q. You write, "It is clear that there 8 is heavier heroin use in the lower income white 9 communities." 10 A. Correct. That's from my 11 observation. 12 Q. And why is that, do you believe? 13 A. Maybe their way of escaping their 14 realities, you know, their low socioeconomic 15 conditions, living in poverty, living amongst 16 poverty. I mean, once again, this is my 17 opinion. 18 Q. And later you write, "Everything is 19 an individual choice, but children whose 20 parents abuse alcohol and drugs are much more 21 likely to abuse heroin." 22 A. That's my observation as well. 23 Q. And so that was really my question 24 to you, whether you saw a correlation between 25 growing up in a family where drugs and alcohol</p>	<p style="text-align: right;">Page 320</p> <p>1 prescribed a pain medication, you took it for a 2 while, you didn't become addicted, but you just 3 liked how it made you feel, and you decided to, 4 thereafter, abuse the drug. That's another 5 route towards heroin abuse, correct? 6 MS. ZIMMERMANN: Object to form. 7 A. Correct. 8 Q. Your final point is here is, "A 9 belief that prescription medication is safe, 10 but eventually the abuse causes addiction." 11 And earlier you testified that you 12 have encountered individuals who just think, 13 "Hey, it's a prescription medication, it must 14 be safe"; does that accurately describe your 15 prior testimony? 16 A. Yes. 17 Q. Now, in connection with those 18 instances, the individuals that you were 19 talking to were not confused by something that 20 they had heard from a particular manufacturer 21 about their prescription drugs, correct? 22 MS. ZIMMERMANN: Object to form. 23 A. I don't know the answer to that 24 question. I'm sorry. Could you -- 25 Q. Yes. All you knew is that the</p>
<p style="text-align: right;">Page 319</p> <p>1 are abused and yourself one day becoming 2 addicted to drugs? 3 A. And the question is, do I believe 4 that? 5 Q. Yes. 6 A. I do. 7 Q. So back up to 3B, in your list of 8 the many different reasons, you write, "An 9 injury that requires strong pain medication can 10 cause an addiction to prescription medication. 11 Once the prescription is no longer available, 12 the person can turn to street opioids, like 13 heroin." And so again, this is your personal 14 opinion? 15 A. It is my personal opinion and my 16 personal experience, dealing with opioid 17 abusers. 18 Q. And you have done no study to 19 quantify the number of instances in which you 20 have seen that? 21 MS. ZIMMERMANN: Objection. Asked 22 and answered. 23 A. No, I have not. 24 Q. And another route to potential 25 heroin abuse is one where you have been</p>	<p style="text-align: right;">Page 321</p> <p>1 individual drew a connection between the fact 2 that it was a prescription drug and the concept 3 that it must, therefore, be safe? 4 A. That's the extent of -- that's the 5 extent of it for me, correct. 6 MR. SHAPLAND: All right. Well in 7 the interest of fairly allocating time, I'm 8 going to pass this off to my colleague. Thank 9 you. 10 EXAMINATION OF MICHAEL CONNELLY 11 BY MR. LAVELLE: 12 Q. Good afternoon, Lieutenant. My 13 name is John Lavelle. I'm an attorney from 14 Morgan Lewis, and I'm representing Rite Aid of 15 Maryland in this matter. 16 Thank you. You have been very 17 patient with us today. I appreciate that, and 18 I know we are late in the day, so I'm going to 19 try to be pretty quick here, in going over just 20 a couple of specific areas. 21 Do you have an understanding, as we 22 sit here, of why the City of Cleveland has sued 23 my client, Rite Aid? 24 A. A broad understanding, but no 25 details.</p>

<p style="text-align: right;">Page 322</p> <p>1 Q. Would you please tell us what that 2 understanding is?</p> <p>3 A. That Rite Aid, as a distributor of 4 opioids, was somehow involved in over -- of the 5 pushing the opioids, the prescription opioids, 6 out into the public.</p> <p>7 Like I said, it is just very broad 8 for me. I have not read every document here, 9 and I'm not a party in this thing, so I'm just 10 trying to give you guys accurate information.</p> <p>11 Q. Now, you described earlier how you 12 have at least skimmed the complaints that have 13 been filed.</p> <p>14 A. Correct.</p> <p>15 Q. And do you recall skimming the 16 parts of the complaint that talked about Rite 17 Aid or the other pharmacy defendants?</p> <p>18 A. I looked at the names. I didn't 19 read -- I very, very briefly looked over that 20 document. I did not read ten full pages of 21 that document.</p> <p>22 Q. All right. Are you familiar with 23 the Controlled Substances Act?</p> <p>24 A. In a basic term.</p> <p>25 Q. What do you understand the</p>	<p style="text-align: right;">Page 324</p> <p>1 that refer to suspicious order monitoring?</p> <p>2 A. In a broad sense I am, only because 3 of my work assisting the diversion team.</p> <p>4 Q. In the course of your career, have 5 you had any involvement in enforcing the 6 suspicious order monitoring provisions?</p> <p>7 A. Not directly, no.</p> <p>8 Q. Has anyone on your task force had 9 that responsibility?</p> <p>10 A. I could not accurately answer that 11 question, but if anybody would have been, it 12 would have been Detective Prince.</p> <p>13 Q. You are currently in an 14 administrative position?</p> <p>15 A. Yes.</p> <p>16 Q. And you have been in an 17 administrative position for some time; is that 18 right?</p> <p>19 A. That's correct.</p> <p>20 Q. About ten years; is that right?</p> <p>21 A. Could you define "administrative 22 position" for me --</p> <p>23 Q. Well --</p> <p>24 A. -- before we move on?</p> <p>25 Q. -- I was trying to use the terms</p>
<p style="text-align: right;">Page 323</p> <p>1 Controlled Substance Act to be?</p> <p>2 A. The DEA sort of identifies which 3 substances are able to be prescribed, and they 4 identify which substances are that have no, you 5 know, no medical purpose. So that may or may 6 not be true, but that's kind of my basic 7 understanding of that.</p> <p>8 Q. Is the work that you have done over 9 the course of your career related to 10 enforcement of the Controlled Substances Act?</p> <p>11 A. Yes, I guess it would be.</p> <p>12 Q. In what respect?</p> <p>13 A. You're asking me a broad question 14 that I really don't have an answer to. My -- I 15 think I would ask you to maybe -- I don't know 16 the answer to that question, basically, is what 17 I'm saying. I mean, because I don't -- I'm not 18 familiar enough with that Act to answer the 19 question.</p> <p>20 Q. Okay. Fair enough. Are you 21 familiar with the provisions in the Controlled 22 Substances Act that relate to -- let me get 23 that out.</p> <p>24 Are you familiar with the 25 provisions of the Controlled Substances Act</p>	<p style="text-align: right;">Page 325</p> <p>1 that you were using earlier.</p> <p>2 A. Okay.</p> <p>3 Q. You are an administrator of the 4 task force, right, you are the 5 co-commissioner --</p> <p>6 A. Okay. Correct.</p> <p>7 Q. -- is that right?</p> <p>8 A. Yes.</p> <p>9 Q. And a lot of your responsibilities 10 involve administering the task force, right?</p> <p>11 A. That's correct.</p> <p>12 Q. You have to make sure that a lot of 13 the administrative details are taken care of?</p> <p>14 A. That's correct.</p> <p>15 Q. You and your co-commissioner are 16 running it, correct?</p> <p>17 A. Correct.</p> <p>18 Q. How much of your time currently is 19 spent in doing investigative work?</p> <p>20 A. Very little.</p> <p>21 Q. How would you -- if you had to put 22 a percentage, a range on "very little," could 23 you give that to us?</p> <p>24 A. Under 10 percent.</p> <p>25 Q. When was the last time you did an</p>



<p style="text-align: right;">Page 326</p> <p>1 interview of a suspect?</p> <p>2 A. It's been a long time. I can't</p> <p>3 remember the exact date of my last interview.</p> <p>4 Q. So we are sitting here on November</p> <p>5 18, as we are doing your deposition; is that</p> <p>6 right?</p> <p>7 A. Uh-huh.</p> <p>8 Q. Have you done any this year, any</p> <p>9 interviews?</p> <p>10 A. No.</p> <p>11 Q. How about last yes, 2017?</p> <p>12 A. I would say suspect interviews, no.</p> <p>13 Q. How about within the last five</p> <p>14 years?</p> <p>15 A. I probably have.</p> <p>16 Q. And probably done a handful maybe</p> <p>17 during that time period?</p> <p>18 A. Correct.</p> <p>19 Q. Less than five?</p> <p>20 A. I can't give you a number, sir, but</p> <p>21 it hasn't been very many. I have taken part,</p> <p>22 sat in, but not as a primary -- as primary</p> <p>23 investigator. That would be my role, as an</p> <p>24 observer.</p> <p>25 Q. And when you sit in as an observer,</p>	<p style="text-align: right;">Page 328</p> <p>1 A. On occasion, yes.</p> <p>2 Q. And when was the last time you did</p> <p>3 an interview of an overdose victim?</p> <p>4 A. By myself or as an observer?</p> <p>5 Q. Let's try each of those. Let's go</p> <p>6 first with by yourself.</p> <p>7 A. Within the last year.</p> <p>8 Q. So sometime during calendar year</p> <p>9 2018?</p> <p>10 A. Yes.</p> <p>11 Q. How about sitting in, where someone</p> <p>12 else was the primary interviewer of an overdose</p> <p>13 victim, when was the last time you did that?</p> <p>14 A. Multiple times, over the last year.</p> <p>15 Q. That would be a more frequent</p> <p>16 occasion?</p> <p>17 A. Yes.</p> <p>18 Q. Okay. Going back to the Controlled</p> <p>19 Substances Act for a moment, are you familiar</p> <p>20 with the aspects of that Act that relates to</p> <p>21 scheduling of drugs?</p> <p>22 A. I understand it broadly, but I</p> <p>23 don't specific -- I don't know which drugs are</p> <p>24 in each category.</p> <p>25 Q. But you are aware generally that</p>
<p style="text-align: right;">Page 327</p> <p>1 someone else on the task force has the</p> <p>2 responsibility for conducting the interview; is</p> <p>3 that right?</p> <p>4 A. Correct.</p> <p>5 Q. And you are there to observe and to</p> <p>6 provide input?</p> <p>7 A. Correct.</p> <p>8 Q. And that's generally been your role</p> <p>9 when you have participated in interviews, for</p> <p>10 the most part, as you have been in your current</p> <p>11 position; is that right?</p> <p>12 A. That's correct.</p> <p>13 Q. When was the last time that you had</p> <p>14 responsibility for being the primary</p> <p>15 interviewer in an interview of a suspect?</p> <p>16 A. It's been a long time. I'm sure</p> <p>17 while I was assigned to narcotics I did, but</p> <p>18 not since I have been on the task force.</p> <p>19 Q. So within the last ten years?</p> <p>20 A. Yes.</p> <p>21 Q. Not within the last ten years?</p> <p>22 A. Within the last ten years.</p> <p>23 Q. How about with respect to overdose</p> <p>24 victims, do you do interviews of those</p> <p>25 individuals?</p>	<p style="text-align: right;">Page 329</p> <p>1 that Act categorizes drugs into different</p> <p>2 schedules, for 1, 2, 3, 4 and 5; is that right?</p> <p>3 A. Yes.</p> <p>4 Q. And you have an understanding that</p> <p>5 there are different attributes of drugs that</p> <p>6 are in one schedule versus another; is that</p> <p>7 correct?</p> <p>8 A. Yes.</p> <p>9 Q. Would you be able to tell us today</p> <p>10 whether a particular drug is in a particular</p> <p>11 category?</p> <p>12 A. I would not.</p> <p>13 Q. Are you familiar with what the</p> <p>14 differences are between category 2 and category</p> <p>15 3?</p> <p>16 A. No.</p> <p>17 Q. Are you familiar generally with a</p> <p>18 type of opioid product called a</p> <p>19 hydrocodone-combination product?</p> <p>20 A. Yes.</p> <p>21 Q. What are those</p> <p>22 hydrocodone-combination products?</p> <p>23 A. I don't know all the products. I</p> <p>24 generally understand that it is a product that</p> <p>25 is used for pain reduction.</p>

<p style="text-align: right;">Page 330</p> <p>1 Q. And how did you become familiar 2 with those?</p> <p>3 A. Partially as a result of my 4 personal experience, and partially as a result 5 of my law enforcement experience.</p> <p>6 Q. All right. When you say your "law 7 enforcement experience," can you please provide 8 some more detail about what you are talking 9 about there?</p> <p>10 A. Understanding that hydrocodone, I 11 believe, is a generic form of, like, codeine -- 12 or not codeine, but OxyContin. It is a very 13 similar substance. It is an opioid that we see 14 abused on the street.</p> <p>15 Q. Have you had any prosecutions while 16 you have been in the task force related to 17 hydrocodone-combination products?</p> <p>18 A. I don't think I have.</p> <p>19 Q. Are you aware of the percentage of 20 abuse of hydrocodone-combination products, as 21 opposed to any other opioids?</p> <p>22 A. I'm not.</p> <p>23 Q. Are you aware of any statistics 24 that are available on that?</p> <p>25 A. I'm not aware of them.</p>	<p style="text-align: right;">Page 332</p> <p>1 down, where do you have that understanding 2 from?</p> <p>3 A. I believe I've either read that or 4 seen it in one of the conferences that I was 5 at.</p> <p>6 Q. But you can't say specifically, as 7 we sit here today?</p> <p>8 A. No, sir.</p> <p>9 Q. You do not have a license to 10 practice medicine, right?</p> <p>11 A. I do not.</p> <p>12 Q. You do not have a license to 13 dispense prescription medications, right?</p> <p>14 A. I do not.</p> <p>15 Q. You don't have any particular 16 medical training, do you?</p> <p>17 A. No, I do not.</p> <p>18 Q. And you would not be in a position 19 to state whether any particular patient should 20 or should not have been prescribed opioids; is 21 that correct?</p> <p>22 A. That's correct.</p> <p>23 Q. All right. Let's go back to this 24 Exhibit 4, if you don't mind. And what I would 25 like you to do is just read for the record</p>
<p style="text-align: right;">Page 331</p> <p>1 Q. Do you have a view as to whether or 2 not abuse of hydrocodone-combination products 3 has been going up, down, or remaining the same, 4 during the time that you have been head of the 5 task force?</p> <p>6 A. Do I have an opinion; is that the 7 question?</p> <p>8 Q. Yes. What's your view on that?</p> <p>9 A. My opinion would be that the -- I'm 10 sorry. Ask me one more time.</p> <p>11 Q. Sure. Do you have a view during 12 the time period that you have been the 13 co-commissioner of the task force, as to 14 whether abuse of hydrocodone-combination 15 products has been going up, going down, or 16 remaining the same?</p> <p>17 A. I don't think I can fully answer 18 the question. I'm aware that the number of 19 prescriptions that have been written -- this is 20 my understanding -- has done down. I don't 21 know about the actual abuse of the combination 22 products, whether that abuse has gone down as 23 well.</p> <p>24 Q. The first part of that, your 25 understanding that the prescriptions have gone</p>	<p style="text-align: right;">Page 333</p> <p>1 here, for the members of the jury who are 2 looking on the video, what your answer was, and 3 you gave this answer as of April 12, 2018; is 4 that right?</p> <p>5 A. Yes, sir.</p> <p>6 Q. Your answer to the question asked 7 by Ms. Butler, "In your opinion, what is the 8 root cause of why people use heroin?" That's 9 question number 3.</p> <p>10 A. Yes.</p> <p>11 Q. Would you mind just reading your 12 answer for the record, please.</p> <p>13 A. "There are many different reasons 14 why a person begins to use heroin. 15 "A, party lifestyle, alcohol, 16 marijuana and other drugs which eventually lead 17 to heavier drugs. 18 "B, an injury that requires strong 19 pain medication can cause an addictive" -- I'm 20 sorry -- "can cause an addiction to 21 prescription medication. Once the prescription 22 is no longer available, the person can turn to 23 street opioids, like heroin. 24 "C, a belief that prescription 25 medications is safe, but eventually the abuse</p>

<p style="text-align: right;">Page 334</p> <p>1 causes addiction."</p> <p>2 Q. Thank you. Now, would you mind</p> <p>3 also reading into the record, and for the</p> <p>4 members of the jury watching this video, what</p> <p>5 your answer was to question number 4, which is,</p> <p>6 "Why do you think the deaths due to heroin are</p> <p>7 on the rise instead of on the decline?"</p> <p>8 A. "The primary reason that deaths are</p> <p>9 on the rise," and then I have in parentheses,</p> <p>10 "they have leveled off and have actually</p> <p>11 dropped in the last few months, is the drug</p> <p>12 fentanyl. Fentanyl is a powerful synthetic</p> <p>13 opioid, it is much stronger than heroin, and</p> <p>14 most overdose deaths are related to fentanyl</p> <p>15 being added or substituted for heroin."</p> <p>16 Q. And then finally, please read for</p> <p>17 the members of the jury watching this video</p> <p>18 what your answer was to question number 6,</p> <p>19 which was, "Do you think users of heroin are</p> <p>20 more likely to start because of coming from</p> <p>21 some sort of life disadvantage, e.g., having a</p> <p>22 single parent, poor school systems, et cetera,</p> <p>23 or would you consider it an entirely individual</p> <p>24 decision?"</p> <p>25 And your answer to question number</p>	<p style="text-align: right;">Page 336</p> <p>1 A. They would be basically the same,</p> <p>2 yes.</p> <p>3 MR. LAVELLE: I'm going to stop</p> <p>4 there. We are going to leave the record open,</p> <p>5 because there are some issues that we have</p> <p>6 raised to plaintiff's counsel relating to</p> <p>7 document production, which we may have to</p> <p>8 address at a later time, but that's all the</p> <p>9 questions I have for you today. Thank you.</p> <p>10 MS. ZIMMERMANN: We are off the</p> <p>11 record.</p> <p>12 THE VIDEOGRAPHER: Off the record</p> <p>13 5:38.</p> <p>14 (Deposition concluded at 5:38 p.m.)</p> <p>15 - - - - -</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>
<p style="text-align: right;">Page 335</p> <p>1 6, what was your answer?</p> <p>2 A. "The reasons for heroin use, as I</p> <p>3 have stated before, are many. It is clear</p> <p>4 there is a heavier heroin use in the lower</p> <p>5 income white communities. The social</p> <p>6 economically disadvantaged seem to be a higher</p> <p>7 rate of drug and alcohol abuse. Everything is</p> <p>8 an individual choice, but children whose</p> <p>9 parents use alcohol and drugs are much more</p> <p>10 likely to abuse heroin."</p> <p>11 Q. Thank you, Lieutenant.</p> <p>12 Did you have any subsequent</p> <p>13 correspondence with Ms. Butler about this</p> <p>14 issue, after this email that we are looking at</p> <p>15 that's marked as Exhibit 4?</p> <p>16 A. I did not.</p> <p>17 Q. Did you ever contact her to tell</p> <p>18 her that your answers were in any way</p> <p>19 incomplete or inaccurate?</p> <p>20 A. I did not.</p> <p>21 Q. All right. As we are sitting here</p> <p>22 on November -- November 7, 2018, do I have the</p> <p>23 date right? I think so. As you read these</p> <p>24 answers, if I asked you these questions today,</p> <p>25 would your answers be the same?</p>	<p style="text-align: right;">Page 337</p> <p>1 Whereupon, counsel was requested to give</p> <p>2 instruction regarding the witness's review of</p> <p>3 the transcript pursuant to the Civil Rules.</p> <p>4</p> <p>5 SIGNATURE:</p> <p>6 Transcript review was requested pursuant to the</p> <p>7 applicable Rules of Civil Procedure.</p> <p>8</p> <p>9 TRANSCRIPT DELIVERY:</p> <p>10 Counsel was requested to give instruction</p> <p>11 regarding delivery date of transcript.</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>



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1 DEPOSITION REVIEW  
CERTIFICATION OF WITNESS

2

3 ASSIGNMENT REFERENCE NO: 3104953

4 CASE NAME: In Re: National Prescription Opiate Litigation v

5 DATE OF DEPOSITION: 11/7/2018

6 WITNESS' NAME: Michael Connelly

7 In accordance with the Rules of Civil

8 Procedure, I have read the entire transcript of

9 my testimony or it has been read to me

10 I have listed my changes on the attached

11 Errata Sheet, listing page and line numbers as

12 well as the reason(s) for the change(s)

13 I request that these changes be entered

14 as part of the record of my testimony

15

16 I have executed the Errata Sheet, as well

17 as this Certificate, and request and authorize

18 that both be appended to the transcript of my

19 testimony and be incorporated therein

20

21 Date \_\_\_\_\_ Michael Connelly

22

23 Sworn to and subscribed before me, a

24 Notary Public in and for the State and County,

25 the referenced witness did personally appear

and acknowledge that:

They have read the transcript;

They have listed all of their corrections

in the appended Errata Sheet;

They signed the foregoing Sworn

Statement; and

Their execution of this Statement is of

their free act and deed

I have affixed my name and official seal

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Commission Expiration Date

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1 ERRATA SHEET

2 VERITEXT LEGAL SOLUTIONS MIDWEST

3 ASSIGNMENT NO: 11/7/2018

4 PAGE/LINE(S) / CHANGE /REASON

5 \_\_\_\_\_

6 \_\_\_\_\_

7 \_\_\_\_\_

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19 \_\_\_\_\_

20 Date \_\_\_\_\_ Michael Connelly

21 SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_

22 DAY OF \_\_\_\_\_, 20\_\_\_\_.

23 \_\_\_\_\_

24 Notary Public

25 \_\_\_\_\_

Commission Expiration Date

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Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY.

THE ABOVE RULES ARE CURRENT AS OF SEPTEMBER 1, 2016. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS  
COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

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